

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number		
County: <u>McPherson</u>		<u>NE</u> $\frac{1}{4}$ <u>SE</u> $\frac{1}{4}$ <u>NE</u> $\frac{1}{4}$	<u>30</u>	T <u>20</u> S	R <u>4</u> W		
Distance and direction from nearest town or city? <u>4 mi. West of GROVELAND, KS.</u>			Street address of well if located within city?				
2 WATER WELL OWNER: <u>MRS. JAKE ENSZ</u>							
RR#, St. Address, Box #: <u>Rt. 1</u>			Board of Agriculture, Division of Water Resources				
City, State, ZIP Code: <u>INMAN, KANSAS 67546</u>			Application Number:				
3 DEPTH OF COMPLETED WELL: <u>145</u> ft. Bore Hole Diameter: <u>8</u> in. to <u>45</u> ft., and _____ in. to _____ ft.							
Well Water to be used as:							
<input checked="" type="checkbox"/> Domestic		5 Public water supply		8 Air conditioning			
3 Feedlot		6 Oil field water supply		9 Dewatering			
2 Irrigation		7 Lawn and garden only		10 Observation well			
4 Industrial				11 Injection well			
				12 Other (Specify below)			
Well's static water level: <u>11</u> ft. below land surface measured on <u>10</u> month <u>20</u> day <u>79</u> year							
Pump Test Data: Well water was <u>20</u> ft. after <u>2</u> hours pumping <u>10</u> gpm							
Est. Yield <u>15</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm							
4 TYPE OF BLANK CASING USED:							
1 Steel		3 RMP (SR)		5 Wrought iron			
<input checked="" type="checkbox"/> 2 PVC		4 ABS		6 Asbestos-Cement			
				7 Fiberglass			
				8 Concrete tile			
				9 Other (specify below)			
Blank casing dia: <u>4</u> in. to <u>30</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.							
Casing height above land surface: <u>24</u> in., weight <u>2</u> lbs./ft. Wall thickness or gauge No. <u>215 in.</u>							
TYPE OF SCREEN OR PERFORATION MATERIAL:							
1 Steel		3 Stainless steel		5 Fiberglass			
2 Brass		4 Galvanized steel		6 Concrete tile			
				7 Torch cut			
				8 RMP (SR)			
				9 ABS			
				10 Asbestos-cement			
				11 Other (specify)			
				12 None used (open hole)			
Screen or Perforation Openings Are:							
1 Continuous slot		<input checked="" type="checkbox"/> 3 Mill slot		5 Gauzed wrapped			
2 Louvered shutter		4 Key punched		6 Wire wrapped			
				7 Torch cut			
				8 Saw cut			
				11 None (open hole)			
Screen-Perforation Dia: <u>4</u> in. to <u>45</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.							
Screen-Perforated Intervals: From <u>30</u> ft. to <u>45</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.							
Gravel Pack Intervals: From <u>15</u> ft. to <u>45</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.							
5 GROUT MATERIAL:							
<input checked="" type="checkbox"/> 1 Neat cement		2 Cement grout		3 Bentonite			
				4 Other			
Grouted Intervals: From <u>5</u> ft. to <u>15</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.							
What is the nearest source of possible contamination:							
1 Septic tank		4 Cess pool		7 Sewage lagoon			
2 Sewer lines		5 Seepage pit		8 Feed yard			
<input checked="" type="checkbox"/> 3 Lateral lines		6 Pit privy		9 Livestock pens			
				10 Fuel storage			
				11 Fertilizer storage			
				12 Insecticide storage			
				13 Watertight sewer lines			
				14 Abandoned water well			
				15 Oil well/Gas well			
				16 Other (specify below)			
Direction from well: <u>South</u> How many feet: <u>100 ft.</u> ? Water Well Disinfected? Yes <input checked="" type="checkbox"/> No							
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, date sample was submitted _____ month _____ day _____ year: Pump Installed? Yes _____ No <input checked="" type="checkbox"/>							
If Yes: Pump Manufacturer's name _____ Model No. _____ HP _____ Volts _____							
Depth of Pump Intake _____ ft. Pumps Capacity rated at _____ gal./min.							
Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other							
6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on <u>10</u> month <u>20</u> day <u>79</u> year							
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>7938</u>							
This Water Well Record was completed on <u>11</u> month <u>19</u> day <u>79</u> year under the business name of <u>PETERSON IRRIGATION INC.</u> by (signature) <u>Mike Peterson</u>							
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
		0	4	Top Soil			
		4	6	Brown Clay			
		6	12	Red Shale			
		12	38 1/2	Red Shale with Green shale			
		38 1/2	39	Loose Red Shale			
		39	45	Very Hard Red Shale			
ELEVATION:							
Depth(s) Groundwater Encountered 1. <u>38 1/2</u> ft. 2. _____ ft. 3. _____ ft. 4. _____ ft. (Use a second sheet if needed)							

OFFICE USE ONLY

T

20

R

4

EW

SEC.

30

NE 1/4

SE 1/4

NE 1/4

NE 1/4