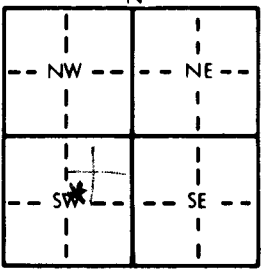


1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Mcpherson</u>		<u>SW</u> 1/4 <u>NE</u> 1/4 <u>SW</u> 1/4	<u>31</u>	T <u>21</u> S	R <u>1</u> E <u>(W)</u>
Distance and direction from nearest town or city street address of well if located within city? <u>2 EAST & 2 1/2 So of Moundville</u>					
2 WATER WELL OWNER:		Board of Agriculture, Division of Water Resources			
RR#, St. Address, Box # : <u>RR #1</u>		Application Number:			
City, State, ZIP Code : <u>Moundville, KS</u>					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>48'</u> ft. ELEVATION: _____ ft.			
<div style="text-align: center;"></div>		Depth(s) Groundwater Encountered 1. <u>28'</u> ft. 2. _____ ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL <u>17'</u> ft. below land surface measured on mo/day/yr <u>5-14-86</u>			
		Pump test data: Well water was <u>46</u> ft. after <u>2</u> hours pumping <u>12</u> gpm			
		Est. Yield <u>12</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Bore Hole Diameter <u>11</u> in. to <u>48</u> ft., and _____ in. to _____ ft.			
WELL WATER TO BE USED AS:		5 Public water supply 8 Air conditioning 11 Injection well			
2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well		Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)			
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> If yes, mo/day/yr sample was submitted _____					
Water Well Disinfected? <u>Yes</u> No					
5 TYPE OF BLANK CASING USED:					
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile		CASING JOINTS: Glued <u>X</u> Clamped _____			
2 <u>PVC</u> 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____		Threaded _____			
3 Fiberglass					
Blank casing diameter <u>5</u> in. to <u>28</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.					
Casing height above land surface <u>24</u> in., weight <u>2.37</u> lbs./ft. Wall thickness or gauge No. <u>214</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement		11 Other (specify) _____			
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)					
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot 3 Mill slot 5 Gauzed wrapped <u>factory</u> 8 Saw cut <u>0.032</u> 11 None (open hole)		9 Drilled holes			
2 Louvered shutter 4 Key punched 6 Wire wrapped 7 Torch cut 10 Other (specify) _____					
SCREEN-PERFORATED INTERVALS: From <u>28</u> ft. to <u>48</u> ft., From _____ ft. to _____ ft.					
From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From <u>10</u> ft. to <u>48</u> ft., From _____ ft. to _____ ft.					
From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 <u>Bentonite</u> 4 Other _____					
Grout intervals: From <u>0</u> ft. to <u>10</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
What is the nearest source of possible contamination:					
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well		11 Fuel storage 15 Oil well/Gas well			
2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)					
3 Watertight sewer lines 6 Seepage pit 9 <u>Feedyard</u> 13 Insecticide storage					
Direction from well? <u>North</u> How many feet? <u>250'</u>					
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	5	Loam to clay			
5	15	red br clay to sandy clay			
15	25	light red brown clay			
25	29	light gray clay			
29	35	fine sand			
35	42	light brown sandy clay			
42	45	sand - med. fine to med.			
45	48	green-gray shale			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>5-14-86</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>457</u> This Water Well Record was completed on (mo/day/yr) <u>5-26-86</u> under the business name of <u>United water well & pump</u> by (signature) <u>Paul Benckhart</u>					
INSTRUCTIONS: Use typewriter or ball point pen, PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.					

OFFICE USE ONLY

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