

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>McPherson</u>		<u>NE 1/4 NE 1/4 NW 1/4</u>	<u>22</u>	T <u>21</u> S	R <u>2</u> EW
Distance and direction from nearest town or city street address of well if located within city? <u>1 North 1/2 West of Moundridge, KS</u>					
2 WATER WELL OWNER:		Board of Agriculture, Division of Water Resources			
RR#, St. Address, Box # :		Application Number:			
City, State, ZIP Code :		<u>Moundridge, KS -</u>			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>38'</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. <u>15'</u> ft. 2. <u>30'</u> ft. 3. <u>ft.</u>			
		WELL'S STATIC WATER LEVEL <u>7'</u> ft. below land surface measured on mo/day/yr <u>4-18-86</u>			
		Pump test data: Well water was <u>38'</u> ft. after <u>1</u> hours pumping <u>8/9</u> gpm			
		Est. Yield <u>8</u> gpm: Well water was <u>38'</u> ft. after <u>hours</u> pumping <u>gpm</u>			
		Bore Hole Diameter <u>11</u> in. to <u>38'</u> ft., and <u>in.</u> to <u>ft.</u>			
		WELL WATER TO BE USED AS:			
		<input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Feedlot <input type="checkbox"/> Oil field water supply <input type="checkbox"/> Dewatering <input type="checkbox"/> Injection well <input type="checkbox"/> Irrigation <input type="checkbox"/> Industrial <input type="checkbox"/> Lawn and garden only <input type="checkbox"/> Observation well <input type="checkbox"/> Other (Specify below)			
		Was a chemical/bacteriological sample submitted to Department? Yes <u>X</u> No <u>X</u> ; If yes, mo/day/yr sample was submitted			
5 TYPE OF BLANK CASING USED:		CASING JOINTS: Glued <u>X</u> Clamped <u>ft.</u>			
<input type="checkbox"/> Steel <input type="checkbox"/> RMP (SR) <input type="checkbox"/> Asbestos-Cement <input type="checkbox"/> Other (specify below) <input checked="" type="checkbox"/> PVC <input type="checkbox"/> ABS <input type="checkbox"/> Fiberglass <input type="checkbox"/> Threaded		Welded <u>ft.</u>			
Blank casing diameter <u>5</u> in. to <u>15</u> ft., Dia <u>in.</u> to <u>ft.</u> , Dia <u>in.</u> to <u>ft.</u>		Casing height above land surface <u>18'</u> in., weight <u>2.37</u> lbs./ft. Wall thickness or gauge No. <u>214</u>			
TYPE OF SCREEN OR PERFORATION MATERIAL:		<input checked="" type="checkbox"/> PVC <input type="checkbox"/> Asbestos-cement <input type="checkbox"/> Steel <input type="checkbox"/> Stainless steel <input type="checkbox"/> Fiberglass <input type="checkbox"/> RMP (SR) <input type="checkbox"/> Other (specify) <u>ft.</u> <input type="checkbox"/> Brass <input type="checkbox"/> Galvanized steel <input type="checkbox"/> Concrete tile <input type="checkbox"/> ABS <input type="checkbox"/> None used (open hole)			
SCREEN OR PERFORATION OPENINGS ARE:		<input type="checkbox"/> Gauzed wrapped <u>factory</u> <input checked="" type="checkbox"/> Saw cut <u>.030</u> <input type="checkbox"/> None (open hole) <input type="checkbox"/> Continuous slot <input type="checkbox"/> Mill slot <input type="checkbox"/> Wire wrapped <input type="checkbox"/> Drilled holes <input type="checkbox"/> Louvered shutter <input type="checkbox"/> Key punched <input type="checkbox"/> Torch cut <input type="checkbox"/> Other (specify) <u>ft.</u>			
SCREEN-PERFORATED INTERVALS:		From <u>15</u> ft. to <u>35</u> ft., From <u>ft.</u> to <u>ft.</u> From <u>ft.</u> to <u>ft.</u> , From <u>ft.</u> to <u>ft.</u> GRAVEL PACK INTERVALS: From <u>10</u> ft. to <u>38</u> ft., From <u>ft.</u> to <u>ft.</u> From <u>ft.</u> to <u>ft.</u> , From <u>ft.</u> to <u>ft.</u>			
6 GROUT MATERIAL:		<input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other <u>ft.</u> Grout Intervals: From <u>0</u> ft. to <u>10</u> ft., From <u>ft.</u> to <u>ft.</u> , From <u>ft.</u> to <u>ft.</u>			
What is the nearest source of possible contamination:		<input checked="" type="checkbox"/> Septic tank <input type="checkbox"/> Lateral lines <input type="checkbox"/> Pit privy <input type="checkbox"/> Livestock pens <input type="checkbox"/> Abandoned water well <input type="checkbox"/> Sewer lines <input type="checkbox"/> Cess pool <input type="checkbox"/> Sewage lagoon <input type="checkbox"/> Fuel storage <input type="checkbox"/> Oil well/Gas well <input type="checkbox"/> Watertight sewer lines <input type="checkbox"/> Seepage pit <input type="checkbox"/> Feedyard <input type="checkbox"/> Fertilizer storage <input type="checkbox"/> Other (specify below) <input type="checkbox"/> Insecticide storage <u>ft.</u>			
Direction from well? <u>North</u>		How many feet? <u>100'</u>			
FROM	TO	LITHOLOGIC LOG		FROM	TO
<u>0</u>	<u>5</u>	<u>Loam to sandy red clay</u>			
<u>5</u>	<u>10</u>	<u>Sandy red clay to brown clay</u>			
<u>10</u>	<u>14</u>	<u>Sand med to fine</u>			
<u>14</u>	<u>20</u>	<u>Sand medium</u>			
<u>20</u>	<u>25</u>	<u>red to grey clay</u>			
<u>25</u>	<u>31</u>	<u>grey clay</u>			
<u>31</u>	<u>34</u>	<u>Sand med to coarse</u>			
<u>34</u>	<u>36</u>	<u>red shale</u>			
<u>36</u>	<u>38</u>	<u>green grey shale</u>			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> (1) constructed, <input type="checkbox"/> (2) reconstructed, or <input type="checkbox"/> (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>4-18-86</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>458</u> This Water Well Record was completed on (mo/day/yr) <u>4-30-86</u> under the business name of <u>United Water Well & Pump</u> by (signature) <u>Paul Burchett</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.					