

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number	
County: <u>McPherson</u>		<u>SE 1/4 SW 1/4 NW 1/4</u>	<u>24</u>	T <u>21</u> S	R <u>2</u> <u>NW</u>	
Distance and direction from nearest town or city? <u>1 mi EAST AND 3 1/2 mi NORTH OF MOUNDORIDGE</u>			Street address of well if located within city?			
2 WATER WELL OWNER: <u>Kenneth Koehn</u>						
RR#, St. Address, Box #: <u>Box 715</u>			Board of Agriculture, Division of Water Resources			
City, State, ZIP Code: <u>MOUNDORIDGE, KS. 67107</u>			Application Number:			
3 DEPTH OF COMPLETED WELL: <u>57</u> ft. Bore Hole Diameter: <u>8</u> in. to <u>57</u> ft., and _____ in. to _____ ft.						
Well Water to be used as:						
<input checked="" type="checkbox"/> Domestic		3 Feedlot	6 Oil field water supply	9 Dewatering	12 Other (Specify below)	
<input type="checkbox"/> 2 Irrigation		4 Industrial	7 Lawn and garden only	10 Observation well		
Well's static water level: <u>20</u> ft. below land surface measured on <u>9</u> month <u>28</u> day <u>79</u> year						
Pump Test Data: Well water was <u>25</u> ft. after <u>1 1/2</u> hours pumping <u>10</u> gpm						
Est. Yield <u>20</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm						
4 TYPE OF BLANK CASING USED:						
1 Steel		3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	Casing Joints: Glued <input checked="" type="checkbox"/> Clamped _____	
<input checked="" type="checkbox"/> 2 PVC		4 ABS	7 Fiberglass		Welded _____	
Blank casing dia. <u>4</u> in. to <u>47</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	8 RMP (SR)	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		<input checked="" type="checkbox"/> 3 Mill slot	5 Gauzed wrapped	8 Saw cut	11 None (open hole)	
2 Louvered shutter		4 Key punched	6 Wire wrapped	9 Drilled holes		
Screen-Perforation Dia. <u>4</u> in. to <u>57</u> ft., Dia. _____ in. to _____ ft., Dia. _____ in. to _____ ft.		Screen-Perforated Intervals: From <u>47</u> ft. to <u>57</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.				
Gravel Pack Intervals: From <u>14</u> ft. to <u>57</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.						
5 GROUT MATERIAL: <input checked="" type="checkbox"/> Neat cement 2 Cement grout 3 Bentonite 4 Other _____						
Grouted Intervals: From <u>4</u> ft. to <u>14</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	11 Fertilizer storage	14 Abandoned water well	
2 Sewer lines		5 Seepage pit	8 Feed yard	12 Insecticide storage	15 Oil well/Gas well	
<input checked="" type="checkbox"/> 3 Lateral lines		6 Pit privy	9 Livestock pens	13 Watertight sewer lines	16 Other (specify below)	
Direction from well: <u>NW</u> How many feet: <u>100</u> ? Water Well Disinfected? Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>						
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 <input checked="" type="checkbox"/> 4 Centrifugal 5 Reciprocating 6 Other _____						
6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <input checked="" type="checkbox"/> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on _____ month <u>28</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>138</u>						
This Water Well Record was completed on _____ month <u>10</u> day <u>15</u> year <u>79</u> 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:		LITHOLOGIC LOG		LITHOLOGIC LOG		
		FROM	TO	FROM	TO	
		<u>0</u>	<u>6</u>	<u>Top Soil</u>		
		<u>6</u>	<u>10</u>	<u>GRAY CLAY</u>		
		<u>10</u>	<u>28</u>	<u>GREEN SANDY CLAY</u>		
		<u>28</u>	<u>33</u>	<u>BROWN SANDY CLAY</u>		
		<u>33</u>	<u>35</u>	<u>FINE SAND</u>		
<u>35</u>	<u>42</u>	<u>BROWN SANDY CLAY</u>				
<u>42</u>	<u>57</u>	<u>FINE to MEDIUM SAND</u>				
<u>57</u>	<u>58</u>	<u>BLUE SHALE</u>				
ELEVATION:						
Depth(s) Groundwater Encountered 1. <u>33</u> ft. 2. _____ ft. 3. _____ ft. 4. _____ ft. (Use a second sheet if needed)						

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, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.