

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>McPherson</u>		<u>NW 1/4 NW 1/4 NW 1/4</u>	<u>8</u>	T <u>21</u> S	R <u>3</u> <u>EW</u>
Distance and direction from nearest town or city street address of well if located within city? <u>5 mi. E, 1 N of Inman</u>					
2 WATER WELL OWNER:		Board of Agriculture, Division of Water Resources			
RR#, St. Address, Box # :		Application Number:			
City, State, ZIP Code :		<u>Inman, KS 67546</u>			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>110</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft.			
		WELL'S STATIC WATER LEVEL <u>56</u> ft. below land surface measured on mo/day/yr <u>8-22-84</u>			
		Pump test data: Well water was <u>66</u> ft. after <u>8</u> hours pumping <u>20</u> gpm			
		Est. Yield <u>50</u> gpm: Well water was .... ft. after .... hours pumping .... gpm			
		Bore Hole Diameter <u>10</u> in. to <u>11.7</u> in. to .... in. to .... in.			
		WELL WATER TO BE USED AS:			
		<input checked="" type="checkbox"/> Domestic    3 Feedlot    6 Oil field water supply    9 Dewatering    12 Other (Specify below) 2 Irrigation    4 Industrial    7 Lawn and garden only    10 Observation well			
		Was a chemical/bacteriological sample submitted to Department? Yes.....No <u>X</u> .....; If yes, mo/day/yr sample was submitted			
		Water Well Disinfected? Yes <u>X</u> No			
5 TYPE OF BLANK CASING USED:		CASING JOINTS: Glued <u>X</u> Clamped .....			
1 Steel		5 Wrought iron	8 Concrete tile	Welded .....	
3 RMP (SR)		6 Asbestos-Cement	9 Other (specify below)	Threaded .....	
<u>2</u> PVC		7 Fiberglass			
4 ABS					
Blank casing diameter <u>6</u> in. to <u>100</u> ft., Dia		in. to .... ft., Dia .... in. to .... ft.			
Casing height above land surface <u>12</u> in., weight <u>3.25</u> lbs./ft. Wall thickness or gauge No. <u>160</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:		<u>2</u> PVC			
1 Steel		5 Fiberglass	8 RMP (SR)	10 Asbestos-cement	
3 Stainless steel		6 Concrete tile	9 ABS	11 Other (specify) .....	
2 Brass				12 None used (open hole)	
4 Galvanized steel					
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped			
1 Continuous slot		<u>8</u> Saw cut			
3 Mill slot		11 None (open hole)			
2 Louvered shutter		6 Wire wrapped			
4 Key punched		9 Drilled holes			
		7 Torch cut			
		10 Other (specify) .....			
SCREEN-PERFORATED INTERVALS:		From <u>100</u> ft. to <u>110</u> ft., From .... ft. to .... ft.			
		From .... ft. to .... ft., From .... ft. to .... ft.			
GRAVEL PACK INTERVALS:		From <u>90</u> ft. to <u>112</u> ft., From .... ft. to .... ft.			
		From .... ft. to .... ft., From .... ft. to .... ft.			
6 GROUT MATERIAL:		2 Cement grout			
1 Neat cement		3 Bentonite			
4 Other .....					
Grout Intervals: From <u>14</u> ft. to <u>14</u> ft., From .... ft. to .... ft., From .... ft. to .... ft.					
What is the nearest source of possible contamination:		10 Livestock pens			
<u>1</u> Septic tank		14 Abandoned water well			
4 Lateral lines		11 Fuel storage			
2 Sewer lines		15 Oil well/Gas well			
5 Cess pool		12 Fertilizer storage			
<u>8</u> Sewage lagoon		16 Other (specify below)			
3 Watertight sewer lines		13 Insecticide storage			
6 Seepage pit					
Direction from well? <u>NE</u>		How many feet? <u>150</u>			
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	3	0/16K Top Soil			
3	14	0/20K Gr Clay Silt			
14	27	0/18r Clay			
27	44	0/28r Clay Silt			
44	60	0/18r Clay			
60	63	0/5 Sand			
63	69	0/Gr Clay			
69	71	0/5 Sand			
71	75	0/Gr Clay			
75	84	1/7 Sand-Sm Gravel-Layers Clay			
84	90	0/Gr Clay			
90	93	1/7 Sand+Gravel			
93	98	0/Blue-Gray Clay			
98	113	1/7 Sand+Gravel			
113	117	0/Blue Clay			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>8-23-84</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>447</u> This Water Well Record was completed on (mo/day/yr) <u>1-24-85</u> under the business name of <u>Miller Drilling</u> by (signature) <u>Egn Miller</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.					