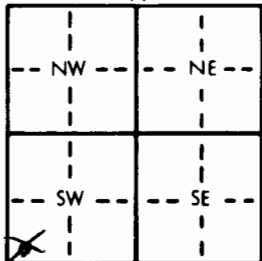


1 LOCATION OF WATER WELL: County: <u>McPherson</u>		Fraction <u>SW 1/4 SW 1/4 SW 1/4</u>	Section Number <u>9</u>	Township Number <u>T 21 S</u>	Range Number <u>R 3</u> <u>SW</u>
Distance and direction from nearest town or city street address of well if located within city? <u>6 miles EAST OF INMAN, KS.</u>					
2 WATER WELL OWNER: RR#, St. Address, Box # : <u>PAUL THIESSEN</u> City, State, ZIP Code : <u>RR #1 INMAN KS.</u>			Board of Agriculture, Division of Water Resources Application Number: <u>36305</u>		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: <div style="text-align: center;">  </div>		4 DEPTH OF COMPLETED WELL <u>164</u> ft. ELEVATION: Depth(s) Groundwater Encountered <u>1</u> ft. <u>58</u> ft. 3. ft. WELL'S STATIC WATER LEVEL <u>38</u> ft. below land surface measured on mo/day/yr <u>4-20-83</u> Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield <u>2000</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm Bore Hole Diameter <u>16</u> in. to <u>164</u> ft., and _____ in. to _____ ft. WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) <u>2 Irrigation</u> 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 _____ No <u>X</u>			
5 TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) <u>6 Asbestos-Cement</u> 8 Concrete tile CASING JOINTS: Glued _____ Clamped <u>X</u> 2 PVC 4 ABS 7 Fiberglass 9 Other (specify below) Welded _____ Blank casing diameter <u>16</u> in. to <u>86</u> ft., Dia <u>16</u> in. to <u>138</u> ft., Dia _____ in. to _____ ft. Casing height above land surface <u>16</u> in., weight <u>32</u> lbs./ft. Wall thickness or gauge No. <u>175 in</u> TYPE OF SCREEN OR PERFORATION MATERIAL: 7 PVC <u>10 Asbestos-cement</u> 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: 5 Gauzed wrapped 8 Saw cut 11 None (open hole) 1 Continuous slot <u>3 Mill slot</u> 6 Wire wrapped 9 Drilled holes 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____ SCREEN-PERFORATED INTERVALS: From <u>86</u> ft. to <u>125</u> ft., From _____ ft. to _____ ft. From <u>138</u> ft. to <u>164</u> ft., From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft. From <u>15</u> ft. to <u>164</u> ft., From _____ ft. to _____ ft.					
6 GROUT MATERIAL: 1 Neat cement <u>2 Cement grout</u> 3 Bentonite 4 Other _____ Grout Intervals: From <u>3</u> ft. to <u>15</u> 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 <u>2 Sewer lines</u> 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below) 13 Insecticide storage Direction from well? <u>NORTH</u> How many feet? <u>800 ft</u>					
FROM TO LITHOLOGIC LOG		FROM TO LITHOLOGIC LOG			
0 5 Top Soil					
5 27 Red Clay					
27 45 Buff Clay					
45 58 SANDY Buff CLAY					
58 80 MEDIUM SAND					
80 83 BROWN CLAY					
83 110 MEDIUM COARSE SAND					
110 115 BROWN CLAY					
115 123 FINE SAND					
123 129 MEDIUM SAND					
129 138 BROWN CLAY					
138 163 MEDIUM SAND					
163 164 GREEN SHALE					
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1) constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>4-20-83</u> 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 (mo/day/yr) <u>4-28-83</u> under the business name of <u>PETERSON IRRIGATION INC</u> by (signature) <u>Mike Peterson</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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21

R

3

EW

SEC.

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SW 1/4

SW 1/4

SW 1/4

SW 1/4