

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number		
County: McPherson		NW ¼ NW ¼ NW ¼		33		T 21 S		R 3 W		
Distance and direction from nearest town or city street address of well if located within city? Approximately 5½ miles east and 3 miles south of Inman										
2 WATER WELL OWNER: Alvin Schroeder										
RR#, St. Address, Box # : 304 E. 3rd.						Board of Agriculture, Division of Water Resources				
City, State, ZIP Code : Buhler, KS 67522						Application Number:				
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:			4 DEPTH OF COMPLETED WELL: 177 ft. ELEVATION: unknown							
			Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.							
			WELL'S STATIC WATER LEVEL . . . 52.5 . . . ft. below land surface measured on mo/day/yr . . . 2-19-92							
			Pump test data: Well water was not ch'd. ft. after hours pumping gpm							
			Est. Yield unknown gpm: Well water was ft. after hours pumping gpm							
			Bore Hole Diameter . . . 24 . . . in. to . . . 176 . . . 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	
			2 Irrigation		4 Industrial		7 Lawn and garden only		10 Monitoring well	
			Was a chemical/bacteriological sample submitted to Department? Yes No X If yes, mo/day/yr sample was submitted							
			Water Well Disinfected? Yes No X							
5 TYPE OF BLANK CASING USED:										
1 Steel		3 RMP (SR)		6 Asbestos-Cement		9 Other (specify below)		CASING JOINTS: Glued Clamped		
2 PVC		4 ABS		7 Fiberglass				Welded X		
								Threaded		
Blank casing diameter . . . 16 . . . in. to . . . 116 . . . ft., Dia in. to ft., Dia in. to ft.										
Casing height above land surface . . . 12 . . . in., weight . . . 42.05 . . . lbs./ft. Wall thickness or gauge No. . . 250										
TYPE OF SCREEN OR PERFORATION MATERIAL:										
1 Steel		3 Stainless steel		5 Fiberglass		8 RMP (SR)		10 Asbestos-cement		
2 Brass		4 Galvanized steel		6 Concrete tile		9 ABS		11 Other (specify)		
								12 None used (open hole)		
SCREEN OR PERFORATION OPENINGS ARE:										
1 Continuous slot		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				
				7 Torch cut		10 Other (specify) . . . Bridge slot				
SCREEN-PERFORATED INTERVALS: From . . . 116 . . . ft. to . . . 176 . . . ft., From ft. to ft., From ft. to ft.										
GRAVEL PACK INTERVALS: From . . . 20 . . . ft. to . . . 176 . . . ft., From ft. to ft., From ft. to ft.										
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other										
Grout intervals: From . . . 0 . . . ft. to . . . 20 . . . 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		
2 Sewer lines		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		. . . none known		
Direction from well? How many feet?										
FROM		TO		LITHOLOGIC LOG		FROM		TO		
0		4		Topsoil, clay						
4		20		Clay, reddish-brown						
20		22		Clay, reddish-brown, caliche						
22		56		Clay, brown, caliche						
56		112		Sand and gravel, very fine, fine, medium, thin clay streaks, gray-green						
112		117		Clay, white						
117		176		Sand and gravel, very fine, fine, medium, thin clay streaks at 152' and 168'						
176				Clay, red and green						
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) . . . 2-19-92 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. . . . 185 This Water Well Record was completed on (mo/day/yr) . . . 3-2-92 under the business name of Clarke Well & Equipment, Inc. by (signature) <i>Alvin Schroeder</i>										
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, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.										