

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <b>McPherson</b>		<b>NE 1/4 NE 1/4 SE 1/4</b>	<b>35</b>	<b>T 21 S</b>	<b>R 3</b>
Distance and direction from nearest town or city street address of well if located within city?					
<b>5 miles West &amp; 1 1/2 South of Moundridge, KS</b>					
2 WATER WELL OWNER: <b>Robert Stucky</b>					
RR#, St. Address, Box # : <b>RR 1</b>			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : <b>Moundridge, KS 67107</b>			Application Number:		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <b>88</b> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. <b>39</b> ft. 2. <b>39</b> ft. 3. <b>39</b> ft.			
		WELL'S STATIC WATER LEVEL <b>39</b> ft. below land surface measured on mo/day/yr <b>7-26-88</b>			
		Pump test data: Well water was <b>30</b> gpm. Well water was <b>11</b> ft. after <b>1 1/2</b> hours pumping <b>30</b> gpm			
		Bore Hole Diameter <b>8</b> in. to <b>88</b> ft. and <b>88</b> in. to <b>88</b> ft.			
WELL WATER TO BE USED AS:					
1 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 <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted					
Water Well Disinfected? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>					
5 TYPE OF BLANK CASING USED:					
1 Steel      3 RMP (SR)      5 Wrought iron      8 Concrete tile      CASING JOINTS: <u>Glued</u> Clamped 2 PVC      4 ABS      6 Asbestos-Cement      9 Other (specify below)      Welded 7 Fiberglass      Threaded					
Blank casing diameter <b>5</b> in. to <b>78</b> ft. Dia. <b>2.91</b> in. to <b>265</b> lbs./ft. Wall thickness or gauge No. <b>265</b>					
Casing height above land surface <b>12</b> in. weight <b>2.91</b> lbs./ft.					
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) <b>030 Slot</b>					
SCREEN-PERFORATED INTERVALS: From <b>78</b> ft. to <b>88</b> ft. From <b>78</b> ft. to <b>88</b> ft.					
GRAVEL PACK INTERVALS: From <b>25</b> ft. to <b>88</b> ft. From <b>25</b> ft. to <b>88</b> ft.					
6 GROUT MATERIAL: 1 Neat cement      2 Cement grout      3 Bentonite      4 Other					
Grout Intervals: From <b>5</b> ft. to <b>25</b> ft. From <b>5</b> ft. to <b>25</b> ft. From <b>5</b> ft. to <b>25</b> 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					
Direction from well? <b>South</b> How many feet? <b>550</b>					
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	3	Top Soil			
3	8	Clay--Brown			
8	31	Clay--Red			
31	50	Clay--Gray			
50	77	Sand--Medium			
77	79	Clay--Gray			
79	90	Sand--Fine to Medium			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <b>7-26-88</b> and this record is true to the best of my knowledge and belief. Kansas					
Water Well Contractor's License No. <b>138</b> This Water Well Record was completed on (mo/day/yr) <b>7-28-88</b>					
under the business name of <b>Peterson Irrigation, Inc.</b> by (signature) <i>Mike Peterson</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 Protection, Topeka, Kansas 66620-7320, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.					