

1 LOCATION OF WATER WELL: County: <u>McPherson</u> Distance and direction from nearest town or city street address of well if located within city?		Fraction <u>NW 1/4 SW 1/4 NW 1/4</u>		Section Number <u>21</u>		Township Number T <u>21</u> S		Range Number R <u>4</u> EW	
2 WATER WELL OWNER: RR#, St. Address, Box # : City, State, ZIP Code :		<u>1 mi. S of Inman</u> <u>Pete Doerkson</u> <u>Rt 1</u> <u>Inman, KS 67546</u>		Board of Agriculture, Division of Water Resources Application Number:					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 1 Mile N W E S X NW NE SW SE		4 DEPTH OF COMPLETED WELL: <u>97</u> ft. ELEVATION: Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft. WELL'S STATIC WATER LEVEL <u>18</u> ft. below land surface measured on mo/day/yr <u>11-1-88</u> Pump test data: Well water was <u>60</u> ft. after <u>1</u> hours pumping <u>15</u> gpm Est. Yield gpm: Well water was ft. after hours pumping gpm Bore Hole Diameter: <u>9</u> in. to <u>4.3</u> ft., and <u>5 1/2</u> in. to <u>97</u> 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) 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring 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: 1 Steel ② PVC 3 RMP (SR) 4 ABS Blank casing diameter <u>6</u> in. to <u>4.3</u> ft., Dia. in. to ft., Dia. in. to ft. Casing height above land surface <u>12</u> in., weight lbs./ft. Wall thickness or gauge No. <u>160</u>		5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below) CASING JOINTS: Glued <u>X</u> Clamped Welded Threaded		TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 6 Concrete tile ② PVC 8 RMP (SR) 9 ABS 10 Asbestos-cement 11 Other (specify) ⑫ None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut ⑬ Saw cut 9 Drilled holes 10 Other (specify) ⑪ None (open hole) SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft. GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft.					
6 GROUT MATERIAL: Grout Intervals: From <u>3</u> ft. to <u>23</u> ft., From <u>38</u> ft. to <u>43</u> ft., From ft. to ft. What is the nearest source of possible contamination: ① Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below) Direction from well? <u>NW</u> How many feet? <u>60</u>		FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS <u>0</u> <u>38</u> <u>br clay</u> <u>38</u> <u>97</u> <u>shale</u>							
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>11-1-88</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>6-3-89</u> under the business name of <u>Miller Drilling</u> by (signature) <u>Eva 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, Bureau of Water Protection, Topeka, Kansas 66620-7320. Telephone: 913-296-5514. Send one to WATER WELL OWNER and retain one for your records.									