

[] LOCATION OF WATER WELL:
County: xxMcPherson
Distance and direction from nearest town or city street address of well if located within city?

[] Fraction sw ¼ nw ¼ ne ¼ se ¼ [] Section Number 25 Township Number T 21 S Range Number R 4 EW

3 miles east 2 south of Inman,Ks.
WATER WELL OWNER: Allen Drilling
RR#, St. Address, Box # : Box 1389
City, State, ZIP Code Great Bend,Ks. 67530 Board of Agriculture, Division of Water Resources
Application Number: T88-229

[] LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

X NW NE SW SE

N E W S

[] DEPTH OF COMPLETED WELL.....135..... ft. ELEVATION:
Depth(s) Groundwater Encountered 1....21.....ft. 2.....ft. 3.....ft.
WELL'S STATIC WATER LEVEL30..... ft. below land surface measured on mo/day/yr ...5-11-88...
Pump test data: Well water wasft. after hours pumping gpm
Est. Yield .NA.... gpm; Well water wasft. after hours pumping gpm
Bore Hole Diameter....10....in. to ...135.....ft., and.....in. toft.
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 Observation well
Was a chemical/bacteriological sample submitted to Department? Yes.....No..x.....; If yes, mo/day/yr sample was sub- mitted
Water Well Disinfected? Yes hth No

[] TYPE OF BLANK CASING USED:

1 Steel 3 RMP (SR)

2 PVC 4 ABS

Blank casing diameter ..5.....in. to ..95.....ft., Dia.....in. toft., Dia.....in. toft.

Casing height above land surface.....18.....in., weight.....lbs./ft. Wall thickness or gauge No. ,258

Type Of Screen Or Perforation Material:

1 Steel 3 Stainless steel 5 Fiberglass 7 Pvc 10 Asbestos-cement

2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify)

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

3 Torch cut 10 Other (specify)

Screen-perforated Intervals: From.....95.....ft. to135.....ft., From.....ft. toft.

From.....ft. toft., From.....ft. toft.

Gravel Pack Intervals: From.....20.....ft. to135.....ft., From.....ft. toft.

From.....ft. toft., From.....ft. toft.

[] GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other

GROUT INTERVALS: FROM.....0.....ft. to20.....ft., FROM.....ft. toft., FROM.....ft. toft.

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? south east How many feet? 130

LITHOLOGIC LOG

FROM TO

0 3 top soil

3 21 Tough gray clay

21 85 Brown soft mealey clay

85 93 Fine sand and blue clay mixed

93 108 Sand and gravel

108 114 Sand and clay mixed

114 130 Sand and gravel

130 135 Blue gray clay

[] 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)5-11-88..... and this record is true to the best of my knowledge and belief. Kansas
Water Well Contractor's License No.134..... This Water Well Record was completed on (mo/day/yr)7-1-88.....
under the business name of Rosnecrantz-Bemis by (signature) Fredia Rodson
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, Office of Oil Field and Environmental Geology, Regulation and Permitting Section, Topeka, Kansas 66620-7500, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.