MW-20M

		LL RECORD	Form W	WC-5	Divisi	on of Wate	r Resources App. N	o	
		OF WATER WELL:	Fraction		Section 1	Number		Range Number	
Cour	ity: Mc	Pherson	14 NE 14 NE	: 1/4 NE1/4	ó	20	T 2/ S	R 4 □E 2 W	
Stree	Street/Rural Address of Well Location; if unknown, distance & direction Global Positioning System (GPS) information:								
		own or intersection: If at o		Latitude: 38.2173.2(in decimal degrees)					
Sau	South of Buckskin Road 350' west of					Longitude.9.77.77.0.8(in decimal degrees)			
8th Ave.						Elevation:			
			41.4		Datum:	WGS 8	4, 🔲 NAD 83, 🗀] NAD 27	
2 WA	TER W.	ELL OWNER: USDA	- Steve Gilm	nore		n Method:			
RR#, Street Address, Box #: 5+00 05/3 Room 47/4-5 City, State, ZIP Code : 406 Independence Are. Sw						GPS unit (Make/Model:)			
City, State, ZIP Code :1406 Independence Ave. SW Washington, DC. 20250-0513						☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey Est. Accuracy: ☐ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m			
2 100	ATE WE	Washingt	m, UC. 10250	-0513	Est. Accu	iracy: [<	3 m, ∐ 3-3 m, <u></u>	3-13 m, <u></u> >13 m	
1	A I E W E H AN "X	"IN 4 DEPTH OF	COMPLETED WELL	r 82		ft			
i	SECTION BOX: Depth(s) Groundwater Encountered (1)								
	N WELL'S STATIC WATER LEVELft. below land surface measured on mo/day/yr								
	Pump test data: Well water wasft. after								
w N	W -NW - NE - E EST. YIELD								
WELL WATER TO BE USED AS: Public water supply Geothermal Injection well									
SW - SE - Domestic Feedlot Oil field water supply Dewatering Other (Specify below)									
Was a chemical/bacteriological sample submitted to Department? Yes No									
S If yes, mo/day/yr sample was submitted									
1 mile Water well disinfected? ☐ Yes ☑ No									
5 TYPE OF CASING USED: Steel PVC Other									
						••••••	••••		
CASING JOINTS: Glued Clamped Welded Threaded Cosing diameter in to the Diameter in to the Diameter in to									
Casing diameter									
Casing neight above land surface									
TYPE OF SCREEN OR PERFORATION MATERIAL: ☐ Steel ☐ Stainless Steel ☐ Other (Specify)									
. =	Brass		☐ None used (open h	ole)	Outer (Spec	· · · · · · · · · · · · · · · · · · ·	************************	***********	
SCREEN OR PERFORATION OPENINGS ARE:									
☐ Continuous slot ☑ Mill slot ☐ Gauze wrapped ☐ Torch cut ☐ Drilled holes ☐ None (open hole)									
☐ Continuous slot ☐ Mill slot ☐ Gauze wrapped ☐ Torch cut ☐ Drilled holes ☐ None (open hole) ☐ Louvered shutter ☐ Key punched ☐ Wire wrapped ☐ Saw cut ☐ Other (specify)									
SCREEN-PERFORATED INTERVALS: From 7.2 ft. to 8.5 ft., From ft. to ft. From ft. to ft., From ft. to ft. GRAVEL PACK INTERVALS: From 7.0 ft. to 8.9 ft., From ft. to ft.									
			From	ft. to	fi بر	t., From	ft.	to ft.	
	GRAV	EL PACK INTERVALS:	From	ft. to🎝	. 7 fi	t., From	ft.	to ft.	
								to ft.	
E .		TERIAL: 🔲 Neat ceme	ent 🔲 Cement grout	: T Benton	nite 🔲 C	ther			
ŀ	ntervals:	From		ı	ft. to	ft.,	From	ft. toft.	
What is the nearest source of possible contamination:									
	Septic ta		es Pit privy	Livestock j		Insecticide		ner (specify below)	
<u> </u>				Fuel storag			l water well		
		ht sewer lines		Fertilizer st		Oil well/ga			
FROM	TO	LITHOLOG	IC I OC	FROM					
	38		IC LOG	FROM	10 1	JII HO. L	JG (cont.) or PLC	JGGING INTERVALS	
0		Clay	1	 					
38	82	weathered Si	haie						
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								THE STATE OF THE S	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 🗷 constructed, \Box reconstructed, or \Box plugged under my jurisdiction and was completed on (mo/day/year) 13.11 and this record is true to the best of my knowledge and belief.									
under my jurisdiction and was completed on (mo/day/year) 9.1.13.11 and this record is true to the best of my knowledge and belief.									
Kansas Water Well Contractor's License No. 59.7. This Water Well Record was completed on (mo/day/year) 9/21/11 under the business name of BOART LONGUEAR CO. by (signature)									
under th	e busine	ss name of .B.O.A.R.TLO.	ngyear co.	<u> </u>	. by (sign	ature)	and W	EM	
INSTRU	CTIONS:	Use typewriter or ball point pen	. PLEASE PRESS FIRMLY	and <u>PRINT</u> cle	arly. Please	fill in blanks	and check the correc	t answers. Send three copies	
(white, blue, pink) to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at									
		ov/waterwell/index.html.	DE WELL OWNER AND I	ciam one lor y	our recolus.	menuae <u>ree</u>	g or \$5.00 tot each g	onsuucicu well. Visit us at	