

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: <u>McPherson</u>		<u>SE 1/4 SE 1/4 NE 1/4</u>		<u>17</u>		T <u>21</u> S		R <u>5</u> EW	
Distance and direction from nearest town or city street address of well if located within city? <u>6 mi W, 1/2 S of Inman</u>									
2 WATER WELL OWNER:		<u>Steve Stanfill</u>							
RR#, St. Address, Box # :		<u>Rt 2</u>							
City, State, ZIP Code :		<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:		4 DEPTH OF COMPLETED WELL: <u>68</u> ft. ELEVATION:							
		Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft.							
		WELL'S STATIC WATER LEVEL <u>11</u> ft. below land surface measured on mo/day/yr <u>5-11-84</u>							
		Pump test data: Well water was <u>34</u> ft. after <u>4</u> hours pumping <u>20</u> gpm							
		Est. Yield <u>30</u> gpm: Well water was .... ft. after .... hours pumping .... gpm							
		Bore Hole Diameter <u>10</u> in. to <u>7.2</u> 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      12 Other (Specify below) 2 Irrigation      4 Industrial <u>Dawn and garden only</u> 10 Observation 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:		5 Wrought iron      8 Concrete tile      CASING JOINTS: Glued <u>X</u> Clamped							
1 Steel      3 RMP (SR)		6 Asbestos-Cement      9 Other (specify below)      Welded							
<u>2</u> PVC      4 ABS		7 Fiberglass      Threaded							
Blank casing diameter <u>6</u> in. to <u>5.7</u> ft. Dia		in. to .... ft. Dia .... in. to .... ft.							
Casing height above land surface <u>12</u> in., weight <u>3.25</u> lbs./ft. Wall thickness or gauge No. <u>160</u>									
TYPE OF SCREEN OR PERFORATION MATERIAL:		<u>2</u> PVC      10 Asbestos-cement							
1 Steel      3 Stainless steel      5 Fiberglass      8 RMP (SR)      11 Other (specify) .....									
2 Brass      4 Galvanized steel      6 Concrete tile      9 ABS      12 None used (open hole)									
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped <u>8</u> Saw cut      11 None (open hole)							
1 Continuous slot      3 Mill slot      6 Wire wrapped      9 Drilled holes									
2 Louvered shutter      4 Key punched      7 Torch cut      10 Other (specify) .....									
SCREEN-PERFORATED INTERVALS:		From <u>5.7</u> ft. to <u>6.8</u> ft., From .... ft. to .... ft.							
		From .... ft. to .... ft., From .... ft. to .... ft.							
GRAVEL PACK INTERVALS:		From <u>5.0</u> ft. to <u>7.2</u> ft., From .... ft. to .... ft.							
		From .... ft. to .... ft., From .... ft. to .... ft.							
6 GROUT MATERIAL:		1 Heat cement      2 Cement grout      3 Bentonite      4 Other .....							
Grout Intervals: From <u>2</u> ft. to <u>12</u> ft., From .... ft. to .... ft., From .... ft. to .... ft.									
What is the nearest source of possible contamination:		10 Livestock pens      14 Abandoned water well							
1 Septic tank      4 Lateral lines      7 Pit privy      11 Fuel storage      15 Oil well/Gas well									
<u>2</u> Sewer lines      5 Cess pool      8 Sewage lagoon      12 Fertilizer storage      16 Other (specify below)									
3 Watertight sewer lines      6 Seepage pit      9 Feedyard      13 Insecticide storage									
Direction from well? <u>E</u>		How many feet? <u>250</u>							
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG				
0	8	Sand							
8	40	Br clay							
40	56	DK Gr clay							
56	60	F Gr Sand							
60	68	Sand + Rubble							
68	72	Red shale							
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1)</u> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>5-25-84</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>5-28-84</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, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.									