

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <u>Saline</u>	<u>SE 1/4 SE 1/4 NE 1/4</u>	<u>14</u>	<u>T 13 S</u>	<u>R 1-W E/W</u>

Distance and direction from nearest town or city street address of well if located within city?
1/2 mile West of Solomon, Ks & 1/2 mile North

2 WATER WELL OWNER: Chester Shaw
 RR#, St. Address, Box # : 4821 N Amos Rd.
 City, State, ZIP Code : Solomon, Ks 67480
 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: 85 ft. ELEVATION: _____
 Depth(s) Groundwater Encountered 1. none ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL _____ ft. below land surface measured on mo/day/yr 4 / 13 / 00
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield 0 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter 6 in. to 85 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 7 Lawn and garden only 10 Monitoring well test hole
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No _____; If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected? Yes * No _____

5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: _____ Clamped _____
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____
 2 PVC 4 ABS 7 Fiberglass _____ Threaded _____
 Blank casing diameter _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface _____ in., weight _____ lbs./ft. Wall thickness or gauge No. _____
 TYPE OF SCREEN OR PERFORATION MATERIAL: 7 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 8 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 _____ ft. to _____ ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____
 Grout Intervals: From 1 ft. to 6 1/2 ft., From _____ ft. to _____ ft., From _____ ft. to _____ 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? WEST How many feet? 112

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	BARK SANDY CLAY	0	1	TOP SOIL
2	7	BROWN SANDY CLAY	1	6 1/2	BENTONITE SEALER
7	11	BROWN CLAY	6 1/2	85	CLAY COMPACTED
11	13	BROWN SANDY CLAY			
13	21	FINE SAND			
21	24	YELLOW SHALEY CLAY			
24	28	OFF YELLOW & GRAY SHALE			
28	41	YELLOW & TAN & GRAY MIXED CLAY			
41	54	GRAY & TAN SHALEY CLAY			
54	85	LITE GRAY SOFT & SHALEY CLAY			

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) 4 / 13 / 00 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 397. This Water Well Record was completed on (mo/day/yr) 4 / 17 / 00 under the business name of CENTRAL KANSAS DRILLING by (signature) Harold D. Martin

OFFICE USE ONLY
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