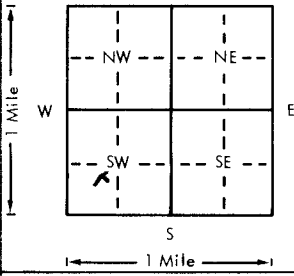


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:	County <u>Saline</u>	Fraction <u>NE 1/4 SW 1/4 SW 1/4</u>	Section number <u>34</u>	Township number T <u>13 S</u> S R <u>2 W</u> E/W	Range number																		
2. Distance and direction from nearest town or city: <u>5 Mi. NE Salina</u> Street address of well location if in city:			3. Owner of well: <u>Mike Losik</u> R.R. or street: <u>1303 Arlington Drive</u> City, state, zip code: <u>Salina Kans 67401</u>																				
4. Locate with "X" in section below: N 			Sketch map: 6. Bore hole dia. <u>6</u> in. Completion date _____ Well depth <u>56</u> ft. <u>3/28/79</u>																				
5. Type and color of material			7. <input checked="" type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary																				
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:80%;">Type and color of material</th> <th style="width:10%;">From</th> <th style="width:10%;">To</th> </tr> </thead> <tbody> <tr> <td><u>Clay, silty, gray + light brown</u></td> <td><u>0</u></td> <td><u>29</u></td> </tr> <tr> <td><u>Gravel, fine to coarse + sand, silty</u></td> <td><u>29</u></td> <td><u>33</u></td> </tr> <tr> <td><u>Clay, dark gray</u></td> <td><u>33</u></td> <td><u>48</u></td> </tr> <tr> <td><u>Gravel, fine to coarse + sand</u></td> <td><u>48</u></td> <td><u>55</u></td> </tr> <tr> <td><u>Clay, gray</u></td> <td><u>55</u></td> <td><u>57</u></td> </tr> </tbody> </table>			Type and color of material	From	To	<u>Clay, silty, gray + light brown</u>	<u>0</u>	<u>29</u>	<u>Gravel, fine to coarse + sand, silty</u>	<u>29</u>	<u>33</u>	<u>Clay, dark gray</u>	<u>33</u>	<u>48</u>	<u>Gravel, fine to coarse + sand</u>	<u>48</u>	<u>55</u>	<u>Clay, gray</u>	<u>55</u>	<u>57</u>	8. Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		
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			9. Casing: Material _____ Height: <u>Above</u> or below Threaded _____ Welded _____ Surface <u>12</u> in. RMP <input checked="" type="checkbox"/> PVC _____ Weight _____ lbs./ft. Dia. <u>4</u> in. to <u>36</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gauge No. <u>200</u>																				
			10. Screen: Manufacturer's name <u>SLIP =</u> <u>(Hydraulic Drilling Co slip)</u> Type <u>slats</u> Dia. <u>4</u> Slot/gauze <u>3/32"</u> Length <u>3'</u> Set between <u>53</u> ft. and <u>56</u> ft. _____ ft. and _____ ft.																				
			11. Static water level: _____ mo./day/yr. <u>17.5</u> ft. below land surface Date <u>3/28/79</u>																				
			12. Pumping level below land surfaces: <u>ND</u> ft. after <u>0.5</u> hrs. pumping <u>15</u> g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>25</u> g.p.m.																				
			13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____																				
			14. Well head completion: <input type="checkbox"/> Pitless adapter <u>12</u> Inches above grade																				
			15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>3</u> ft. to <u>13</u> ft.																				
			16. Nearest source of possible contamination: <u>170</u> ft. Direction <u>N</u> Type <u>RIVER</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																				
			17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.p.m. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other																				
			(Use a second sheet if needed)																				
18. Elevation: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley		19. Remarks:		20. Water well contractor's certification: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. <u>Hydraulic Drilling Co 126</u> Business name _____ License No. _____ Address <u>Salina Kans</u> Signed <u>O. J. Felt</u> Date <u>4/2/79</u> Authorized representative																			

T 13
 R 2
 E 34
 Sec NE SW SW

Forward the white, blue and pink copies to the Department of Health and Environment

Form WWC-5