

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <b>SALINE</b>	<b>NE 1/4 NW 1/4 NE 1/4</b>	<b>12</b>	<b>T 13 S</b>	<b>R 3W E/W</b>

Distance and direction from nearest town or city street address of well if located within city?  
**450' NORTHWEST OF O.W. #3-02** O.W.#6-02

2 WATER WELL OWNER: **OTTAWA COUNTY R.W.D. #2**

RR#, St. Address, Box # : **P.O. BOX 3551** Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code : **SALINA, KS. 67402-3551** Application Number:

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

N	
	X
NW	NE
W	E
SW	SE
S	

4 DEPTH OF COMPLETED WELL ..... **136** ..... ft. ELEVATION: ..... **1237.31** ..... ft.

Depth(s) Groundwater Encountered 1 ..... ft. 2 ..... ft. 3 ..... ft.

WELL'S STATIC WATER LEVEL **74.49** ft. below land surface measured on **17 OCT 02**

Pump test data: Well water was **AIRPUMPED** ft. after ..... hours pumping ..... gpm  
 Est. Yield ..... gpm: Well water was ..... ft. after ..... hours pumping ..... gpm

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
2 Irrigation	4 Industrial	7 Domestic (lawn & garden)
9 Dewatering	10 <u>Monitoring well</u>	12 Other (Specify below)

Was a chemical/bacteriological sample submitted to Department? Yes ..... No **X** .....; If yes, mo/day/yr sample was submitted  
 Water Well Disinfected? Yes **X** No

5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued	Clamped
2 PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below)	<del>Welded</del>	<del>Screwed</del>
		7 Fiberglass		Threaded	

Blank casing diameter ..... **2** ..... in. to ..... **116** ..... ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.

Casing height above land surface ..... **36** ..... in., weight ..... **280** ..... lbs./ft. Wall thickness or gauge No. **SCH. 40**

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	8 RMP (SR)	11 Other (Specify)
			9 ABS	12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot	3 Mill slot <b>.032</b>	5 Gauzed wrapped	8 Saw cut	11 None (open hole)
2 Louvered shutter	4 Key punched	6 Wire wrapped	9 Drilled holes	
		7 Torch cut	10 Other (specify)	

SCREEN-PERFORATED INTERVALS: From ..... **116** ..... ft. to ..... **136** ..... ft., From ..... ft. to ..... ft.

GRAVEL PACK INTERVALS: From ..... **50** ..... ft. to ..... **89** ..... ft., From ..... **102** ..... ft. to ..... **136** ..... ft.

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

Grout Intervals: From ..... **0** ..... ft. to ..... **50** ..... ft., From ..... **89** ..... ft. to ..... **102** ..... 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	<b>OPEN PASTURE NONE APPARENT</b>

Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	TS brn, silty	120	135	Ss, white-lt. gray w/f, hard
1	6	Clay, brn, soft	135	136	Shale, w/pyrite, gray v. hard
6	10	Clay, brn-org-tan, w/streaks ironstone			
10	12	Clay, gray, firm			
12	20	Ss, w-f, w/hardstks ironstone, clay			
20	26	Ss, w-f, w/much ironstone strks, gray-white-vel clay			
26	35.5	Clay, gray, firm, w/few strks Ss			
35.5	36	Shale, cemented, V.V. hard			
36	46	Clay, white-lt. gray, firm			
46	47	Clay, yel-orange, firm			
47	55	Ss, tan, w-f, loose, w/few strks gray			
55	63	Ss, white-lt tan, w-f loose, some clay from above			
63	107	Ss, yel-tan, w-f, loose, variegated to white & orange			
107	120	Ss, w-f, loose, white, more firm w/depth			

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) ..... **17 OCT 02** ..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No ..... **388** ..... This Water Well Record was completed on (mo/day/yr) ..... **26 NOV 82** ..... under the business name of **PESTINGER PUMP SERVICE** by (signature) *[Signature]*

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send up three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.