

|                           |                             |                |                 |                |
|---------------------------|-----------------------------|----------------|-----------------|----------------|
| 1 LOCATION OF WATER WELL: | Fraction                    | Section Number | Township Number | Range Number   |
| County: <b>SALINE</b>     | <b>NE 1/4 SW 1/4 NE 1/4</b> | <b>17</b>      | <b>T 14 S</b>   | <b>R 2W EW</b> |

Distance and direction from nearest town or city street address of well if located within city?  
**401 S. ESTATES DR.**

2 WATER WELL OWNER: **CHUCK STIEN**  
 RR#, St. Address, Box #: **401 S. ESTATES DR.**  
 City, State, ZIP Code: **SALINA, KS. 67401**  
 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: <b>59</b> ft. ELEVATION: <b>1251</b> |
|--|---|

Depth(s) Groundwater Encountered 1. **18** ft. 2. **18** ft. 3. **18** ft.

WELL'S STATIC WATER LEVEL **18** ft. below land surface measured on mo/day/yr **8-5-00**

Pump test data: Well water was **40** ft. after **1** hours pumping **25** gpm

Est. Yield **40** gpm: Well water was **40** ft. after **1** hours pumping **25** gpm

Bore Hole Diameter **9** in. to **59** ft., and **9** in. to **59** 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 Domestic (lawn & garden) 10 Monitoring well

Was a chemical/bacteriological sample submitted to Department? Yes.  No.  X; If yes, mo/day/yrs 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. <input checked="" type="checkbox"/> X Clamped. <input type="checkbox"/> |
| 2 PVC   | 4 ABS      | 6 Asbestos-Cement | 9 Other (specify below) | Welded. <input type="checkbox"/>  |
|         |            | 7 Fiberglass      |                         | Threaded. <input type="checkbox"/>  |

Blank casing diameter **5** in. to **49** ft., Dia. **5** in. to **49** ft., Dia. **5** in. to **49** ft.

Casing height above land surface **14** in., weight **160** lbs./ft. Wall thickness or gauge No. **SDR 26**

TYPE OF SCREEN OR PERFORATION MATERIAL:

|         |                    |                 |              |                          |
|---------|--------------------|-----------------|--------------|--------------------------|
| 1 Steel | 3 Stainless steel  | 5 Fiberglass    | <u>7 PVC</u> | 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  | <u>3 Mill slot</u> <b>.026</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 **49** ft. to **59** ft., From **49** ft. to **59** ft., From **49** ft. to **59** ft.

GRAVEL PACK INTERVALS: From **28** ft. to **59** ft., From **28** ft. to **59** ft., From **28** ft. to **59** ft.

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

Grout Intervals: From **0** ft. to **28** ft., From **0** ft. to **28** ft., From **0** ft. to **28** 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     |
| <u>3 Watertight sewer lines</u> | 6 Seepage pit   | 9 Feedyard      | 12 Fertilizer storage  | 16 Other (specify below) |
|                                 |                 |                 | 13 Insecticide storage |                          |

Direction from well? **NORTH** How many feet? **20**

| FROM | TO | LITHOLOGIC LOG     | FROM | TO | PLUGGING INTERVALS |
|------|----|--------------------|------|----|--------------------|
| 0    | 2  | FILL DIRT          |      |    |                    |
| 2    | 12 | CLAY BROWN SOFT    |      |    |                    |
| 12   | 25 | SANDY LOOM TAN     |      |    |                    |
| 25   | 34 | CLAY BROWN SILTY   |      |    |                    |
| 34   | 39 | CREEK GRAVEL BROWN |      |    |                    |
| 39   | 51 | CLAY DARK BROWN    |      |    |                    |
| 51   | 59 | CREEK GRAVEL BROWN |      |    |                    |

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) **8-5-00** 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) **8-18-00** under the business name of **PESTINGER PUMP SERVICE** by (signature) *Paul Pester*