

| | | | | | | | | | |
|--|--|--|--|-------------------|--|---|--|-----------------------|--|
| 1 LOCATION OF WATER WELL: SALINE | | Fraction S 1/4 SW 1/4 NW 1/4 | | Section Number 30 | | Township Number T 14 S | | Range Number R 2W E/W | |
| Distance and direction from nearest town or city street address of well if located within city? #21 RED FOX LANE | | | | | | | | | |
| 2 WATER WELL OWNER: WESTON MCKEE | | | | | | | | | |
| RR#, St. Address, Box # : #21 RED FOX LANE | | | | | | Board of Agriculture, Division of Water Resources | | | |
| City, State, ZIP Code : SALINA, KS. 67401 | | | | | | Application Number: | | | |
| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: | | 4 DEPTH OF COMPLETED WELL 58 ft. ELEVATION: 1231 | | | | | | | |
| | | Depth(s) Groundwater Encountered 1 23.5 ft. 2 ft. 3 ft. | | | | | | | |
| | | WELL'S STATIC WATER LEVEL 23.5 ft. below land surface measured on mo/day/yr 03-09-05 | | | | | | | |
| | | Pump test data: Well water was 26.5 ft. after 1 hours pumping 25 gpm | | | | | | | |
| | | Est. Yield 7.5 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 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/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 X Clamped | | | | | | | | | |
| 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded | | | | | | | | | |
| Blank casing diameter 5 in. to 48 ft. Dia 160 in. to ft. Dia in. to SDR 26 | | | | | | | | | |
| Casing height above land surface 16 in., weight 160 lbs./ft. Wall thickness or guage No. | | | | | | | | | |
| 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 .025 5 Guazed 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) ft. | | | | | | | | | |
| SCREEN-PERFORATED INTERVALS: From 48 ft. to 58 ft., From ft. to ft. | | | | | | | | | |
| GRAVEL PACK INTERVALS: From 22 ft. to 58 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 AS PER CORPS INSRUCTIONS | | | | | | | | | |
| Grout Intervals: From 1 ft. to 22 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? SOUTH How many feet? 15 | | | | | | | | | |
| FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS | | | | | | | | | |
| 0 3 FILL DIRT | | | | | | | | | |
| 3 22 SANDY LOOM TAN | | | | | | | | | |
| 22 24 CLAY TAN SOFT | | | | | | | | | |
| 24 58 SAND FINE TO COARSE TAN | | | | | | | | | |
| 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) 03-09-05 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) 03-09-05 | | | | | | | | | |
| under the business name of PESTINGER PUMP SERVICE by (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 top 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. | | | | | | | | | |