		WA	TER WELL REC	ORD	Form	WWC-	-5	KSA 82a-	1212 [[O No.						
1 LOCATIO					Section Number			Township Number			Range Number					
County:	SALIN	E	NW 1/4	NE_	1/4	NW	1/4		31		Т	14	S	R	2W	E/W
Distance and	direction f	rom nearest to	wn or city street a	address o	f well	if locate	ed with	nin city?	-							
		PENNACLE														
			WALKER													
RR#, St. Addi	ress, Box	# : 2402	PENNACLE	DR.							Boar	d of Agrid	culture, [Division of	Water Re	sources
	City, State, ZIP Code : SALINA, KS . 67401 Application Number:														<u>,</u>	
OCATE WELL'S LOCATION WITH 4 DEPTH OF COMPLETED WELL																
AN "X" IN SECTION BOX: Depth(s) Groundwater Encountered 120												X.E	ft.			
N WELL'S STATIC WATER LEVEL20ft. below land surface measured on mo/day/yr8—1.2:											<u>-05</u>					
	, X	1	mp test data: Well water was													
N	TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well										gpiii					
	c 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)															
w	4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well															
- SW SE Was a chemical/bacteriological sample submitted to Department? Yes NoX; If yes, mo/day/yrs sample was su													vas sub-			
mitted Water Well Disinfected											X	No				
	S															
5 TYPE OF		ASING USED:		5 Wrou	aht iro	nn .		8 Concre	ete tile		CASII	NG JOIN	TS: Glue	ed	Clamped	
1 Steel 3 RMP (SR)				5 Wrought iron6 Asbestos-Cement7 Fiberglass				9 Other (specify below			OAOII	10 00111		ded		
2 PVC 4 ABS													Thre	aded		
			in. to													
Casing heigh	t above la	nd surface	1.4	in., v	weight	1	6.0			lb	s./ft. Wall	thickness	s or guag	ge No.S.D.	R26	
TYPE OF SC	. •				7 PVC				10 Asbes	stos-Cen	nent					
1 Steel	5 Fiberglass				8 RMP (SR)						·)					
2 Brass		4 Galvaniz	6 Cond	rete ti	le		9 AB	SS			12 None	used (o	pen hole)			
SCREEN OR	PERFOR	ATION OPENII				5 Gu	azed	wrapped			8 Saw c	ut		11 None	(open h	ole)
	uous slot		Mill slot .025					pped			9 Drilled					
2 Louver	red shutter	r 4 K	(ey punched			7 10	rch cu	t			10 Other	(specify)	•••••			π.
SCREEN-PE	RFORATE	D INTERVALS														
0.0) A) (E) DA (OK INTERVALO	From	21		. ft. to			ft., Fr	om	•••••		ft. to			ft.
GH	AVEL PAU	CK INTERVALS	From			.π.το ft to		⊋.4	π., ⊢r ft Fr	om			ft to))	•••••	ft
			1 10111			. 11. 10		•••••	11., 1 1	OIII				,		
6 GROUT	MATERIA	L: 1 Nea	t cement	2 Ce	ment	grout		3 Ben	tonite	4	Other					
Grout Interva	ls: From	າ 0	2.1 ft., Fromft.				to		ft., Fro	n		ft. to		ft.		
What is the n	earest sou	rce of possible						10 Liv	esto	ck pens		14 /	Abandoned	l water w	ell	
1 Septic	7 Pit privy				11 Fuel st			rage		15 (Dil well/Ga	s well				
2 Sewer	8 Sewage lag				goon 12 Fertil			izer storage 16			Other (specify below)					
3 Water	9 Feedyard					13 Insecticide storage										
Direction from	n well?	EAST							How many feet?				40			
FROM	ТО		LITHOLOGIC	LOG				FROM	TO			PLUG	GING IN	ITERVALS		
0	3	FILL D														
3	12		N SILTY													
12	53		INE TO ME	D.												
53	54	CLAY G	RAY HARD													
							-									
										<u> </u>						
															-	
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7 CONTRAC	TOP'S O	D I ANDOMAIC	R'S CERTIFICA		io+	OF 11-11	was '	(1) const	untod (O)		otrustad	or (0) =1	ancd	dor mu i	iodiation	and was
	mo/day/w	- LANDOWNE	-05	HON: IN	is wat	ei well	was_(LI CONSTI	ucted, (2) I and thi	econ:	ord fe true	or (3) PIU	t of make	nowledge :	and helief	Kaneae
Water Well Co	ontractor's	Licence No	388		т:	his Wat	ter Wa	II Record	was comp	eted		Vr)	1 8 1	2-05	"IO DOILG!	
			INGER PUM					1 100014			gnature)		1/1	, Lu	7	5
										2 (/	W		// 1	

INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> 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 <u>constructed</u> well.