WATER WELL RECORD For				C -5	Division of Water Resources; App. No.			
1	LOCATION OF WA		Fraction		Section Number			
-	County: Saline	from nearest town or	SE1/4 1/4	1/4	7	T / S 4	R 2 E/ 3	
	Distance and direction from nearest town located within city?		city street address of well if		Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude:			
	located within city:							
2	WATER WELL OWNER: Meshanes				Longitude: Elevation:			
	RR#, St. Address, Box # : 1835 E. Month Street				Datum:			
-	City, State, ZIP Code Salina KS 67401				Data Collection Method:			
3	LOCATE WELL'S	4 DEPTH OF COM	PLETED WELL	4.	3 ft			
	LOCATION				-			
	WITH AN "X" IN					ft. (3)		
	SECTION BOX: WELL'S STATIC WATER LEVELft. below land surface measured on mo/day/yr							
•	.,					hours pumping		
3	NW 1 X E	WELL WATER TO					ection well	
W	E 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; If yes, mo/day/yrs							
	Sample was submitted							
	S Sample was submitted							
5	TYPE OF CASING U	JSED: 5 Wrough	t Iron 8 Coi	ncrete tile	CASIN	G JOINTS: Glued	Clamped	
	TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued Clamped 9 Other (specify below) Welded Welded							
	1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded							
Bl	Slank casing diameter in. to							
	Casing height above land surface							
1 Steel 3 Stainless Steel 5 Fiberglass PVC 9 ABS 11 Other (Specify)								
2 Brass 4 Galvanized Steal 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)								
SC	SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot							
Sc								
	Fromft. toft., Fromft. toft.							
	GRAVEL PACK INTERVALS: From 21 ft. to 42 ft., From ft. to ft. to ft.							
	From							
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other								
Grout Intervals: From								
What is the nearest source of possible contamination:								
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specif 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well below)								
	2 Sewer lines	5 Cess pool lines 6 Seepage pit	8 Sewage lagoon	11 Fuel s	0	il well/gas well	below) Vn Known	
Di	rection from well?							
	ROM TO	LITHOLOGI		FROM		PLUGGING INTE	ERVALS	
	Unk	nown - Dinier	+ Mish					
		no cering						
T CONTRACTOR'S OR LANDOWNER'S CERTIFICATION. This was well we will be a discovered and the contract of the con								
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) . 6: 1301.06 and this record is true to the best of my knowledge and belief.								
Kansas Water Well Contractor's License No								
un	der the business name o	f Plains En vicor	amental Servi	ices b	y (signature)	nu Kalu		
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or cirgle 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. Visit us at							