County: <u>Saline</u> Fraction <u>NE NE SW</u>	<u>SE</u> Sec. <u>30</u> T <u>/4</u> S R 2 EN
CORRECTION(S) TO WATER WELL CO (to rectify lacking or incor Owner: Kelly Dunn Construction	rect information)
Location was listed as:	Location changed to:
Section-Township-Range: 26-55-3 W	30-145-241
Fraction (1/4 1/4 1/4):	NE NE SW SE
Other changes: Initial statements:	
Changed to:	
Comments:	
Verification method: Latitude # longitude # well site address # city stre on KG \(\sup_6 \) \	t KG5" LEO" conversion tool,
Submitted by: Kansas Geological Survey, Data Resources Library, 193 to: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW	initials: OR date: 6/26/2015 0 Constant Ave., Lawrence, KS 66047-3726 Jackson, Suite 420, Topeka, KS 66612-1367.

WATE	R WE	LL RECORD	Form W	WC-5	D	ivision of Wate	r Resources App. N		
1 LOCATION OF WATER WELL: County: Saline			Fraction NE ¼ NE ¼ SW	/ ¼ SE ½		ion Number 26	Township No. T 5 S	Range Number R 3 □E ☑W	
Stree	eet/Rural Address of Well Location; if unknown, distance & direction					Global Positioning System (GPS) information:			
from	nearest	town or intersection: If at o	wner's address, check	here 🔲.		Latitude: .38,80093134 (in decimal degrees)			
230	7 Sadd	ebrook - Salina, Ks			Long	Longitude: 97.5814092 (in decimal degrees)			
						Elevation: 1235 ft			
2 WATER WELL OWNER: Kelly Dunn Construction						Datum: ☐ WGS 84, ☑ NAD 83, ☐ NAD 27 Collection Method:			
RR#, Street Address, Box #: 3059 Quail Creek Rd.						GPS unit (Make/Model:)			
City, State, ZIP Code : Salina, Kansas 6740						☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey			
					Est. A	Est. Accuracy: ☐ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m			
3 LOC		.	COMPLETED WELL	r 47		e.			
	ITH AN "X" IN CCTION BOX: N 4 DEPTH OF COMPLETED WELL47								
	N	WELL'S STATI	C WATER LEVEL	20	t. below	land surface	measured on mo/d	av/vr. 4/24/2015	
		Pump	test data: Well wate	r was	f	t. after	hours pum	ping gpm	
_N	w N	EST. YIELD. 30	gpm. Well water	r was	fl	t. after	hours pum	pinggpm	
w i	" '	E Bore Hole Diame	eter9in. to <u></u>						
		WELL WATER	TO BE USED AS:	Public wa	ter supp	oly 🔲 Ge	othermal	njection well	
sv	٧ - س							Other (Specify below)	
		☐ Irrigation	bacteriological sample	Domesuc-12	wn & ga	arden 🔲 Mic	onitoring wen		
	S		day/yr sample was sub				162 110		
	1 mile		fected? 📝 Yes 🔲		• • • • • • • • •	***********			
5 TVP	FOFC	ASING USED:	PVC 🗆 C	Wher					
		rs: Ø Glued □ Clar				•••••	••••		
		ter in. to .37				ft D	iameter	in. to ft.	
Casin	g height	above land surface12	in., Weight	2.37	lbs./i	ft., Wall thic	kness or gauge No	o. 0.214	
TYPE	OF SCR	EEN OR PERFORATION !	MATERIAL:						
_ =	Steel	Stainless Steel	Z PVC	[Other ((Specify)	•••••	•••••	
_	Brass	Galvanized Steel		ole)					
SCREEN OR PERFORATION OPENINGS ARE: ☐ Continuous slot									
	Louvere	d shutter 🔲 Key punched	☐ Wire wrapped ☐	Saw cut	☐ Otl	her (specify)			
SCREE	N-PERI	FORATED INTERVALS:							
	CD 417	EL DACK DIEDDIALG	From f	ft. to	• • • • • • • • • • • • • • • • • • • •	ft., From	ft. 1	to ft.	
	GRAV	EL PACK INTERVALS:	From	tt. to .*. !	• • • • • • • • • • • • •	It., From	: tt. ا	to ft.	
6 GRO	UT MA	TERIAL: Neat ceme	nt Cement grout	□ Bento	nite [n., rioii	IL. I	to ft.	
Grout In	tervals:	From ft. to			ft. to	ft	From	ft. toft.	
What is	the near	est source of possible contar	mination:			,			
	Septic ta			Livestock		☐ Insecticide		er (specify below)	
	Sewer lin	=		Fuel stora	_	Abandoned			
FROM	ТО	LITHOLOGI		FROM	TO			GGING INTERVALS	
0	3	Topsoil							
3	19	Clay, tan							
19	51	Sand/gravel- clean							
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ✓ constructed, ☐ reconstructed, or ☐ plugged									
under my jurisdiction and was completed on (mo/day/year). 4/24/2015 and this record is true to the best of my knowledge and belief.									
Kansas Water Well Contractor's License No									
under the business name of Peterson McNett Drilling, Inc. by (signature) by (signature) INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly Please fill in blanks and check the correct answers. Send one copy to									
marku(Kansas De	ose typewriter or the point pen. Epartment of Health and Environm	rease rkess rikmly ent, Bureau of Water, Geol	and <u>PKINT</u> c	icariy. Ple 000 SW 1	zase IIII in blanks Jackson St., Suite	and check the correct at 420. Topeka Kansas	answers. Send one copy to	
Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at									
http://www.kdheks.gov/waterwell/index.html									