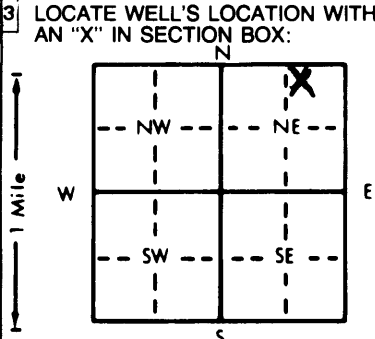


1 LOCATION OF WATER WELL: County: Saline Fraction NW 1/4 NE 1/4 NE 1/4 Section Number 16 Township Number T 14 S Range Number R 2 NW

Distance and direction from nearest town or city street address of well if located within city?  
1 mile East of Salina, KS

2 WATER WELL OWNER: Frank Marks  
 RR#, St. Address, Box #: RR 6, 3692 E. Country Club Rd. Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: Salina, KS 67401 Application Number:



4 DEPTH OF COMPLETED WELL: 59 ft. ELEVATION: ..... ft.  
 Depth(s) Groundwater Encountered 1, 19 ft. 2. .... ft. 3. .... ft.  
 WELL'S STATIC WATER LEVEL 19 ft. below land surface measured on mo/day/yr 12-14-88  
 Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm  
 Est. Yield 3-5 gpm: Well water was ..... ft. after ..... hours pumping ..... gpm  
 Bore Hole Diameter: 8 in. to 61 ft., and ..... in. to ..... 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 Lawn and garden only 10 Observation 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 ..... Clamped .....  
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded .....  
 7 Fiberglass Threaded .....  
 Blank casing diameter 5 in. to 25 ft., Dia 29 ft. to 49 ft., Dia ..... in. to ..... ft.  
 Casing height above land surface 12 in., weight 2.91 lbs./ft. Wall thickness or gauge No. 265  
 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) .....  
 12 None used (open hole)  
 SCREEN OR PERFORATION OPENINGS ARE:  
 1 Continuous slot 3 Mill slot 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 25 ft. to 29 ft., From ..... ft. to ..... ft.  
 From 49 ft. to 59 ft., From ..... ft. to ..... ft.  
 GRAVEL PACK INTERVALS: From 25 ft. to 59 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 .....  
 Grout Intervals: From 5 ft. to 25 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? West How many feet? 200

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	3	Top Soil			
3	28	Clay			
28	29	Creek Sand			
29	46	Clay			
46	54	Loose Gray Shale			
54	61	Gray Shale			

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) 12-14-88 and this record is true to the best of my knowledge and belief. Kansas  
 Water Well Contractor's License No. 138 This Water Well Record was completed on (mo/day/yr) 12-17-88  
 under the business name of Peterson Irrigation, Inc. by (signature) Mike Peterson

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 Protection, Topeka, Kansas 66620-7320, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY T R EW SEC. 1/4 1/4 1/4