

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: SALINE		NW 1/4 NE 1/4 NW 1/4	30	T 14 S	R 2 E/W
Distance and direction from nearest town or city street address of well if located within city? 1508 E. CLOUD					
2 WATER WELL OWNER: A. LORENSON					
RR#, St. Address, Box # : 1508 E. CLOUD			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: 42 ft. ELEVATION: 1231			
<div style="text-align: center;"><p>1 Mile</p></div>		Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.			
		WELL'S STATIC WATER LEVEL 25 ft. below land surface measured on mo/day/yr 9-24-91			
		Pump test data: Well water was ft. after hours pumping gpm			
		Est. Yield gpm: Well water was ft. after hours pumping gpm			
		Bore Hole Diameter in. to 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 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 Clamped	
2 PVC 4 ABS		6 Asbestos-Cement 9 Other (specify below)		Welded	
		7 Fiberglass		Threaded	
Blank casing diameter 6 in. to ft. Dia in. to ft. Dia in. to ft.					
Casing height above land surface D in., weight lbs./ft. Wall thickness or gauge No.					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify)		7 PVC 10 Asbestos-cement			
2 Brass 4 <u>Galvanized steel</u> 6 Concrete tile 9 ABS 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)		6 Wire wrapped 9 Drilled holes			
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) N/A					
SCREEN-PERFORATED INTERVALS: From ft. to ft. From ft. to ft. From ft. to ft.					
GRAVEL PACK INTERVALS: From ft. to ft. From ft. to ft. From ft. to ft.					
6 GROUT MATERIAL: 1 Neat cement 2 <u>Cement grout</u> 3 Bentonite 4 Other					
Grout Intervals: From 6 ft. to 6 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		11 Fuel storage 15 Oil well/Gas well			
2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below) NONE		13 Insecticide storage			
3 Watertight sewer lines 6 Seepage pit 9 Feedyard					
Direction from well? How many feet?					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
			42	25	CHLORANTED SAND
			25	20	BENTONITE HOLEPLUG
			20	6	CLAY MATERIAL
			6	0	CONCRETE
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) 9-24-91 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 388 This Water Well Record was completed on (mo/day/yr) 9-24-91 under the business name of PESTINGER PUMP SERVICE by (signature) <i>[Signature]</i>					
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, Topeka, Kansas 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					