				WELL RECORD				****		
1 LOCATION O		R WELL:	Fraction	C117	T	Section Number	Township N		Range Number	
County: SALI		am nearest to	SE 1/4	SW 1/4 S		30	T 14	S	R 2 E/W	
Distance and di	rection tr	om nearest tov	-	Idress of well if locate	_	· ?				
2 WATER WE		ER: MAX SH	_2304 SHALI EPARD	MAR DR.						
PR# St Address	ac Boy	4 · 230/1 S	HAT.TMAR DR				Board of A	arioulturo F	hivinian of Water Passurana	
RR#, St. Address, Box # : 2304 SHALIMAR DR . City, State, ZIP Code : SALINA , KS . 67401						Board of Agriculture, Division of Water Resources Application Number:				
City, State, ZIP	Code	ANITUAC:	, K5. 0/401	OMPLETED WELL	52		Application	i Number.		
AN "X" IN SE	ECTION	BOX:	Depth(s) Groundv	OMPLETED WELL vater Encountered 1 WATER LEVEL	14 .	ft. 2	2	ft. 3.	6-21-94 ft.	
   NV	N -	- NE	Pump Est. Yield 7	test data: Well wate	erwas erwas		fter <mark>1</mark> fter	hours pur	mping	
Wije			WELL WATER TO			,	8 Air conditioning		njection well Other (Specify below)	
sv	N   -	- SE	1 Domestic	3 Feedlot	6 Oil field v	water supply	9 Dewatering	12 (	Other (Specify below)	
	l	1	2 Irrigation							
$\frac{1}{x_1}$	ــِـــــــــــــــــــــــــــــــــــ			acteriological sample :	submitted to		esNo <del>!</del> ter Well Disinfecte			
5 TYPE OF BI	ANK C	SING USED:	mitted	5 Wrought iron	8 Con	crete tile			X No	
1 Steel	,AIVIT OF	3 RMP (S	R)	6 Asbestos-Cement		er (specify belov			ed	
2 PVC		4 ABS	•	7 Fiberglass					ded	
	ameter .			•					n. to ft.	
									SDR 26	
TYPE OF SCRE	EEN OR	PERFORATIO	N MATERIAL:	-	7_[	PVC	10 Ast	estos-ceme	nt	
1 Steel		3 Stainles	s steel	5 Fiberglass	8 1	RMP (SR)	11 Oth	er (specify)		
2 Brass		4 Galvaniz	ed steel	6 Concrete tile	9 /	ABS	12 Nor	ne used (op	en hole)	
SCREEN OR P	ERFOR/	ATION OPENIN		5 Gauz	ed wrapped		8 Saw cut		11 None (open hole)	
1 Continuo	ous slot	3 <u>N</u>	lill slot •035	6 Wire	wrapped		9 Drilled holes			
2 Louvere	d shutte	r 4 K	ey punched	7 Torch	cut co		10 Other (specify	/)		
SCREEN-PERF	ORATE	INTERVALS:							o	
GRAV	EL PAC	K INTERVALS:							o	
ar			From	ft. to		ft., Fro			l	
6 GROUT MAT	 ΓERIAL:	1 Neat	cement 2		_3_Be					
Grout Intervals:									. ft. to	
What is the nea							tock pens		pandoned water well	
1 Septic to	ank	4 Late	ral lines	7 Pit privy		11 Fuel	storage	15 O	il well/Gas well	
2 Sewer li		5 Cess		8 Sewage lago			zer storage 16 Other (specify below)		ž.	
		r lin <u>es</u> 6 Seep	age pit	9 Feedyard		13 Insec	ticide storage		,	
Direction from v		SOUTI		-		How ma	119 1001.	30		
FROM T	го		LITHOLOGIC I	_OG	FROM	то	PI	LUGGING II	NTERVALS	
	1	TOP SOII								
	19	SANDY LO								
19	34	SAND FIN								
34 4	52	SAND MEI	O. TAN				<del> </del>			
	$\longrightarrow$					_				
						_				
	$\longrightarrow$									
<u> </u>							<del> </del>			
			4.1.444.5444							
7 CONTRACT	OR'S O	R LANDOWNE	R'S CERTIFICATION	ON: This water well w	as (1) cons	tructed. (2) reco	pastructed, or (3)	olugged une	er my jurisdiction and was	
completed on (r								est of my kn	wledge and belief. Kansas	
				This Water V					1-94	
			NGER PUMP SE				iture) Oul	Ste	lino	
INSTRUCTIONS	S: Use type	ewriter or ball point	pen. PLEASE PRESS FI	RMLY and PRINT clearly. Pk	ease fill in blant	ks, underline or circle	e the correct answers.	Send top three	copies to Kansas Department	
of Health and	Environme	nt, Bureau of Water	, Topeka, Kansas 66620	0-0001. Telephone: 913-296-	5545. Send one	to WATER WELL O	WNER and retain one f	or your records		
		<del></del>								