

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: Saline		SW ¼ SW ¼ SW ¼		12		T 14 S		R 3 EW	
Distance and direction from nearest town or city street address of well if located within city? 301 W. Ash - Salina									
2 WATER WELL OWNER: Reimold Properties, Inc.									
RR#, St. Address, Box # : P.O. Box 1302					Board of Agriculture, Division of Water Resources				
City, State, ZIP Code : Salina, Kansas 67402					Application Number:				
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 38 ft. ELEVATION: 1224.75							
		Depth(s) Groundwater Encountered 1. 27 ft. 2. ft. 3. ft.							
		WELL'S STATIC WATER LEVEL . . . 27.74 . . . ft. below land surface measured on mo/day/yr . . . 9/8/95 . . .							
		Pump test data: Well water was . . . NA . . . ft. after hours pumping gpm							
		Est. Yield . . NA . . . gpm: Well water was ft. after hours pumping gpm							
		Bore Hole Diameter . . . 8 . . . in. to . . . 38 . . . 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 <input checked="" type="checkbox"/> ; If yes, mo/day/yr sample was submitted									
Water Well Disinfected? Yes No <input checked="" type="checkbox"/>									
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. <input checked="" type="checkbox"/>									
Blank casing diameter 2 in. to 23 ft, Dia in. to ft, Dia in. to ft									
Casing height above land surface -3.6 in., weight lbs./ft. Wall thickness or gauge No. Sch. 40									
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)									
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)									
2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes									
7 Torch cut 10 Other (specify)									
SCREEN-PERFORATED INTERVALS: From 23 ft. to 38 ft, From ft. to ft									
From ft. to ft, From ft. to ft									
GRAVEL PACK INTERVALS: From 20 ft. to 38 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 0 ft. to 18 ft, From 18 ft. to 20 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)									
UST Tank Basin									
Direction from well? NW How many feet? 125									
FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS									
0 2 Clay, Dark Brown									
2 4 Clay, Dark Brown									
4 10 Clay, Light Brown									
10 14 Silt, Light Brown									
14 25 Clay, Light Brown									
25 27 Clay, Light Brown									
27 38 Clay, Light Orange Brown									
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) 9/15/95 and this record is true to the best of my knowledge and belief.									
Kansas Water Well Contractor's License No. 527 This Water Well Record was completed on (mo/day/yr) 10/17/95									
under the business name of GeoCore Services, Inc. by (signature) <i>Dale Kell</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 65620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.									

OFFICE USE ONLY

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