Application Number: LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: Depth(s) Groundwater Encountered 1. 32. ft. 2. ft. 3. WELL'S STATIC WATER LEVEL 32. 3. ft. below land surface measured on mo/day/yr 2. 23. 9 Pump test data: Well water was Pump test data: Well wate
Stance and direction from nearest town or city street address of well if located within city? SEC N Republic and 15 E 5 A SALTHA WATER WELL OWNER: C/4 of SALTHA WASTER WELL SUCATION WITH A DEPTH OF COMPLETED WELL. 6.1.1. ft. ELEVATION: Depth(s) Groundwater Encountered 1. 32. ft. 2. ft. 3. WELL'S STATIC WATER LEVEL 32.3. ft. below land surface measured on mo/day/yr 2.23.9.4. Pump test data: Well water was NA. ft. after hours pumping Est. Yield NA. gpm: Well water was ft. after hours pumping Bore Hole Diameter 2. in. to 3. ft., and in. to 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. Security Sample was water Well Disinfected? Yes No. X TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued Clamped 11 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded MASS 7 Fiberglass Threaded X
WATER WELL OWNER: C/H OF SALFUM A**, St. Address, Box * : 3 cc A5 !! Board of Agriculture, Division of Water Resc. Application Number: LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: Depth(s) Groundwater Encountered 1. 3 2. ft. 2. ft. 3. WELL'S STATIC WATER LEVEL 3 2. 3. ft. below land surface measured on mo/day/yr 2. 2 3.9 4. Pump test data: Well water was 1.1 ft. after hours pumping Est. Yield 1.1 A. gpm: Well water was 1.1 ft. after hours pumping Bore Hole Diameter 2. in. to 6.3 ft., and in. to 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 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes No
WATER WELL OWNER: C/H of SALFUM R*, St. Address, Box #: 3 co w. A511 by, State, ZIP Code : 5ALFUM, K.S. L/YOI Application Number: LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: Depth(s) Groundwater Encountered 1. 3 2. ft. 2. ft. 3. WELL'S STATIC WATER LEVEL. 3 2. 5. ft. below land surface measured on mo/day/yr 2. 2. 3. 9 4. Pump test data: Well water was ft. after hours pumping Est. Yield N. A. gpm: Well water was ft. after hours pumping Bore Hole Diameter. 2. in. to 6. 3. ft. and in. to 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 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes. No
Board of Agriculture, Division of Water Rescription, State, ZIP Code SALERIA, KS ZIYO1 Application Number: LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: Depth (s) Groundwater Encountered 1. 3.7. ft. 2. ft. 3. WELL'S STATIC WATER LEVEL. 3.2.3. ft. below land surface measured on mo/day/yr 2. 2.3.9.4. Pump test data: Well water was PA. ft. after hours pumping Est. Yield N.A. gpm: Well water was ft. after hours pumping Bore Hole Diameter. 2. in. to 6.3. ft., and in. to 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) Was a chemical/bacteriological sample submitted to Department? Yes. No
Application Number: LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: Depth(s) Groundwater Encountered 1. 32. ft. 2. ft. 3. WELL'S STATIC WATER LEVEL 32. 3. ft. below land surface measured on mo/day/yr 2. 23. 9 Pump test data: Well water was 1. 1
Depth(s) Groundwater Encountered 1. 32. ft. 2. ft. 3. WELL'S STATIC WATER LEVEL. 32. 3. ft. below land surface measured on mo/day/yr 2. 2. 3. 9. 4. Pump test data: Well water was 1. 1. after hours pumping Est. Yield 1. 1. 2. ft. after hours pumping Bore Hole Diameter 2. in. to 2. 3. ft. after hours pumping 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 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued Clamped 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded Threaded X
ank casing diameter
ising height above land surface
record above land surface
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify)
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)
CREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 8 Saw cut 11 None (open hole
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes
2 Louvered shutter 4 Key punched , 7 Torch cut 10 Other (specify)
From ## to ## ft. to ## ft. to ## ft. to ### ft.
GRAVEL PACK INTERVALS: From. 29. ft. to 43. ft., From ft. to ft., From ft. to ft., From ft. to
GROUT MATERIAL 1 Neat cement 2 Cement crout 3 Rentonite 4 Other
out Intervals: From
hat is the nearest source of possible contamination: 10 Livestock pens 14 Abandoned water well
1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well
2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage
rection from well? How many feet?
ROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS
0 4 LOHM, MED Brown
4 9 SHADY SILL MED BROWN MMW 14
9 14 SILL SAND LT-MED Brown
14 19 SHADY Silk LT-MED Brown Sunface Completion Bu
19 24 Sill OK BAN KWWC Lierace # 527
24 29 CLAYRY Silt, LEGY/BRN
29 39 Silly Clay MED Die Cy
31 63 SAND, MEN REDIBRN, F-C
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and mpleted on (mo/day/year) 2 - 2 5 - 9 4
ater Well Contractor's License No 6.04
der the business name of Environmental Priority Service, Inc by (signature)
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 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.