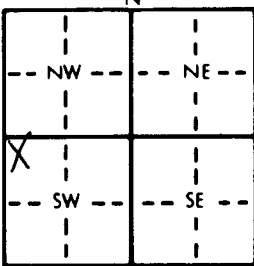


1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Saline</u>		<u>NW 1/4 NW 1/4 SW 1/4</u>	<u>12</u>	<u>T 14 S</u>	<u>R 3 E</u>
Distance and direction from nearest town or city street address of well if located within city? <u>Ed 9th between AT & SE RR tracks & CRISP RR tracks, S of North St.</u>					
2 WATER WELL OWNER:		Board of Agriculture, Division of Water Resources			
RR#, St. Address, Box #:		Application Number:			
City, State, ZIP Code:					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>42</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.			
		WELL'S STATIC WATER LEVEL <u>24.95</u> ft. below land surface measured on mo/day/yr <u>4-23-96</u>			
		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 <u>8.25</u> 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 <u>10 Monitoring well</u>			
		Was a chemical/bacteriological sample submitted to Department? Yes No <u>X</u> ; If yes, mo/day/yr sample was submitted			
		Water Well Disinfected? Yes No <u>X</u>			
5 TYPE OF BLANK CASING USED:		CASING JOINTS: Glued Clamped			
1 Steel 3 RMP (SR)		Welded			
<u>2 PVC</u> 4 ABS		<u>Threaded</u> <u>Flush</u>			
Blank casing diameter <u>2</u> in. to ft. Dia. in. to ft. Dia. in. to ft.					
Casing height above land surface <u>Flush</u> in. weight <u>703</u> lbs./ft. Wall thickness or gauge No. <u>Sch 40</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:		10 Asbestos-cement			
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)			
SCREEN OR PERFORATION OPENINGS ARE:		8 Saw cut 11 None (open hole)			
1 Continuous slot <u>3 Mill slot</u>		9 Drilled holes			
2 Louvered shutter 4 Key punched		10 Other (specify)			
SCREEN-PERFORATED INTERVALS: From <u>30</u> ft. to <u>40</u> ft. From ft. to ft.					
GRAVEL PACK INTERVALS: From <u>30</u> ft. to <u>42</u> ft. From ft. to ft.					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout <u>3 Bentonite</u> 4 Other					
Grout Intervals: From <u>0.5</u> ft. to <u>25</u> ft. From <u>25</u> ft. to <u>28</u> ft. From ft. to ft.					
What 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		12 Fertilizer storage 16 Other (specify below)			
2 Sewer lines 5 Cess pool 8 Sewage lagoon 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
0	3.5	Gravel, w/ sand & silt			
3.5	16.5	Silt, same clay			
16.5	19.5	Clay			
19.5	28	Clay, silty			
28	36	Clay, some silt			
36	37.5	Silty clay			
37.5	38.8	Sand			
38.8	42	Silt, clayey			
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) <u>4-23-96</u> and this record is true to the best of my knowledge and belief. Kansas					
Water Well Contractor's License No. <u>531</u> This Water Well Record was completed on (mo/day/yr) <u>5-20-96</u>					
under the business name of <u>GSI</u> by (signature) <u>Alison Irwin</u>					
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.					