

1 LOCATION OF WATER WELL:		Fraction		Section Number	Township Number	Range Number
County: Saline		SW ¼	NW ¼	SW ¼	24	T 14 S R 3 EW
Distance and direction from nearest town or city street address of well if located within city? 400' W Santa Fe & 15' S Minneapolis - Salina, KS						
2 WATER WELL OWNER: City of Salina						
RR#, St. Address, Box # : 300 W. Ash				Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : Salina, Kansas 67401				Application Number:		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: 45 ft. ELEVATION: 1227.96				
		Depth(s) Groundwater Encountered 1. 33.54 ft. 2. _____ ft. 3. _____ ft.				
		WELL'S STATIC WATER LEVEL _____ ft. below land surface measured on mo/day/yr				
		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 45 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
2 PVC		4 ABS		6 Asbestos-Cement		9 Other (specify below)
				7 Fiberglass		CASING JOINTS: Glued _____ Clamped _____
						Welded _____
						Threaded <input checked="" type="checkbox"/>
Blank casing diameter 2 in. to 35 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.						
Casing height above land surface 4.44 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
2 Brass		4 Galvanized steel		6 Concrete tile		8 RMP (SR)
						9 ABS
						10 Asbestos-cement
						11 Other (specify) _____
						12 None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE:						
1 Continuous slot		3 Mill slot		5 Gauzed wrapped		8 Saw cut
2 Louvered shutter		4 Key punched		6 Wire wrapped		9 Drilled holes
				7 Torch cut		10 Other (specify) _____
						11 None (open hole)
SCREEN-PERFORATED INTERVALS: From 35 ft. to 45 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.						
GRAVEL PACK INTERVALS: From 31 ft. to 45 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 29 ft. From 29 ft. to 31 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
2 Sewer lines		5 Cess pool		8 Sewage lagoon		11 Fuel storage
3 Watertight sewer lines		6 Seepage pit		9 Feedyard		12 Fertilizer storage
						13 Insecticide storage
						14 Abandoned water well
						15 Oil well/Gas well
						16 Other (specify below)
Direction from well? _____ How many feet? _____						
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	
0	5	Silt, Medium to Dark Brown				
5	10	Silt, Medium to Dark Brown				
10	12	Silt, Medium to Dark Brown				
12	15	Silt, Medium Brown				
15	19.5	Silt, Medium Brown				
19.5	20	Silt, Dark Brown				
20	22	Silt, Dark Brown				
22	25	Silt, Medium Brown				
25	27	Silt, Medium Brown				
27	29.5	Clay, Medium Brown				
29.5	34	Clay, Medium Brown				
34	37	Sand, Medium Red Brown				
37	39.5	Sand, Medium Red Brown				
39.5	45	Sand, Medium Red Brown				
			MW5, Flushmount			
			Project Name: Salina Downtown-CDM			
			GeoCore # 126, CDM # 8558-112			
7 CONTRACTOR'S OR LANDOWNERS CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 4/5/96 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) 5/3/96						
under the business name of GeoCore Services, Inc. by (signature) <i>Don Robt</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 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.						

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