

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Saline</u>		<u>SW</u> $\frac{1}{4}$ <u>NW</u> $\frac{1}{4}$ <u>SE</u> $\frac{1}{4}$	<u>27</u>	T <u>14</u> S	R <u>3</u> 2W
Distance and direction from nearest town or city street address of well if located within city? <u>Well #99M25 @ Former Schilling AFB, Salina KS</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>24.3</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. 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 ft. after hours pumping gpm			
		Est. Yield gpm: Well water was ft. after hours pumping gpm			
		Bore Hole Diameter <u>8</u> in. to <u>24.3</u> 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</u> Monitoring well			
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</u> PVC 4 ABS		Threaded. <u>X</u>			
Blank casing diameter <u>2</u> in. to <u>13</u> ft. Dia. in. to ft. Dia. in. to ft.		Casing height above land surface <u>0</u> in., weight lbs./ft. Wall thickness or gauge No. <u>Sch 40</u>			
TYPE OF SCREEN OR PERFORATION MATERIAL:		<u>7</u> PVC 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:		5 Gauzed wrapped 8 Saw cut 11 None (open hole) 1 Continuous slot <u>3</u> Mill slot 6 Wire wrapped 9 Drilled holes 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)			
SCREEN-PERFORATED INTERVALS:		From <u>13</u> ft. to <u>23</u> ft. From ft. to ft. From ft. to ft. From ft. to ft.			
GRAVEL PACK INTERVALS:		From <u>10</u> ft. to <u>24.3</u> ft. From ft. to ft. From ft. to ft. From ft. to ft.			
6 GROUT MATERIAL:		4 Other			
1 Neat cement 2 Cement grout <u>3</u> Bentonite					
Grout Intervals: From <u>2.5</u> ft. to <u>10</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 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage <u>16</u> Other (specify below) 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage <u>Former AFB</u>			
Direction from well?		How many feet?			
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	15	Silty clay			
15	16	Clayey sand			
16	22	Sandy clay			
22	23	Clayey sand			
23	24.3	Sandy clay			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1)</u> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>7/14/97</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>570</u> This Water Well Record was completed on (mo/day/yr) <u>9/3/97</u> under the business name of <u>AQUADRILL, INC.</u> by (signature) <u>[Signature]</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.					