

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number				
County: <u>SALINE</u>	<u>SW</u> $\frac{1}{4}$ <u>NE</u> $\frac{1}{4}$ <u>NW</u> $\frac{1}{4}$	<u>13</u>	<u>T</u> <u>14</u> <u>S</u>	<u>R</u> <u>3W</u> <u>E/W</u>				
Distance and direction from nearest town or city street address of well if located within city? <u>121 S. 4th</u>								
2 WATER WELL OWNER: <u>DR. BRAD STUEWE</u>								
RR#, St. Address, Box # : <u>737 E. CRAWFORD</u>			Board of Agriculture, Division of Water Resources					
City, State, ZIP Code : <u>SALINA, KS. 67401</u>			Application Number:					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <u>69</u> ft. ELEVATION: <u>1220</u>						
<div style="text-align: center;">N</div> <table border="1" style="width:100%; height:100px; border-collapse: collapse;"> <tr> <td style="text-align: center;">NW</td> <td style="text-align: center;">NE</td> </tr> <tr> <td style="text-align: center;">SW</td> <td style="text-align: center;">SE</td> </tr> </table> <div style="text-align: center;">S</div>		NW	NE	SW	SE	Depth(s) Groundwater Encountered 1 <u>39</u> ft. 2 <u>45</u> ft. 3 <u>25</u> ft. WELL'S STATIC WATER LEVEL <u>39</u> ft. below land surface measured on mo/day/yr <u>9-14-04</u> Pump test data: Well water was <u>60+</u> ft. after <u>1</u> hours pumping <u>25</u> gpm Est. Yield <u>60+</u> gpm: Well water was <u>45</u> ft. after <u>1</u> hours pumping <u>25</u> gpm WELL WATER TO BE USED AS: 1 Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well 2 Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering 12 Other (Specify below) <u>7 Domestic (lawn & garden)</u> 10 Monitoring well		
		NW	NE					
		SW	SE					
		Was a chemical/bacteriological sample submitted to Department? Yes <u>X</u> No <u> </u> ; If yes, mo/day/yr sample was submitted						
Water Well Disinfected? Yes <u> </u> No <u> </u>								
5 TYPE OF BLANK CASING USED:								
1 Steel		3 RMP (SR)		5 Wrought iron				
2 PVC		4 ABS		6 Asbestos-Cement				
				7 Fiberglass				
Blank casing diameter <u>6</u> in. to <u>59</u> ft. Dia		Casing height above land surface <u>20</u> in., weight <u>160</u> lbs./ft. Wall thickness or gauge No. <u>SLR 26</u>		8 Concrete tile				
TYPE OF SCREEN OR PERFORATION MATERIAL:		CASING JOINTS: Glued <u>X</u> Clamped <u> </u>						
1 Steel		Welded <u> </u>						
3 Stainless Steel		Threaded <u> </u>						
2 Brass		7 PVC						
4 Galvanized Steel		8 RMP (SR)						
		10 Asbestos-Cement						
		11 Other (Specify) <u> </u>						
		12 None used (open hole)						
SCREEN OR PERFORATION OPENINGS ARE:								
1 Continuous slot		3 Mill slot <u>.025</u>		5 Guazed wrapped				
2 Louvered shutter		4 Key punched		6 Wire wrapped				
				7 Torch cut				
				8 Saw cut				
				9 Drilled holes				
				10 Other (specify) <u> </u> ft.				
SCREEN-PERFORATED INTERVALS:		SCREEN-PERFORATED INTERVALS:						
From <u>59</u> ft. to <u>69</u> ft.		From <u>59</u> ft. to <u>69</u> ft.						
From <u>4</u> ft. to <u>10</u> ft.		From <u>30</u> ft. to <u>49</u> ft.						
GRAVEL PACK INTERVALS:		GRAVEL PACK INTERVALS:						
From <u>52</u> ft. to <u>59</u> ft.		From <u>52</u> ft. to <u>59</u> ft.						
6 GROUT MATERIAL:								
1 Neat cement		2 Cement grout		3 Bentonite				
4 Other <u> </u>		4 Other <u> </u>						
Grout Intervals: From <u>0</u> ft. to <u>4</u> ft.		Grout Intervals: From <u>10</u> ft. to <u>30</u> ft.						
What is the nearest source of possible contamination:		What is the nearest source of possible contamination:						
1 Septic tank		4 Lateral lines		7 Pit privy				
2 Sewer lines		5 Cess pool		8 Sewage lagoon				
3 Watertight sewer lines		6 Seepage pit		9 Feedyard				
Direction from well? <u>WEST</u>		How many feet? <u>65</u>						
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS			
0	9	FILL DIRT						
9	27	CLAY TAN SILTY						
27	50	SAND FINE TOX MED. TAN						
50	51	CLAY GRAY						
51	69	SAND FINE TOX MED. TAN						
RECEIVED								
OCT 08 2004								
BUREAU OF WATER								
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>9-14-04</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No <u>388</u> This Water Well Record was completed on (mo/day/yr) <u>9-14-04</u> under the business name of <u>PESTINGER PUMP SERVICE</u> by (signature) <u>Paul Pester</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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.								