

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County:	<u>SALINA</u>	<u>N 1/4 SW 1/4 N 1/4</u>	<u>16</u>	<u>14</u>	<u>3W</u>

Distance and direction from nearest town or city street address of well if located within city?

2 mi. West of Salina, KS

2	WATER WELL OWNER: <u>SALINE COUNTY ENGINEERING</u>	Board of Agriculture, Division of Water Resources
RR #, St. Address, Box #:	<u>3424 AIRPORT RD</u>	Application Number:
City, State, ZIP Code	<u>SALINA, KS 67401</u>	

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL <u>61</u> ft.
		WELL'S STATIC WATER LEVEL <u>15 1/2</u> ft.	
		WELL WAS USED AS:	
		1 Domestic	5 Public Water Supply
		<u>2 Irrigation</u>	6 Oil Field Water Supply
		3 Feedlot	7 Domestic (Lawn & Garden)
		4 Industrial	8 Air Conditioning
		9 Dewatering	10 Monitoring Well
			11 Injection Well
			12 Other

Was a chemical / bacteriological sample submitted to Department? Yes No X

If yes, mo/day/yr sample was submitted

Water Well Disinfected: Yes X No

5	TYPE OF BLANK CASING USED:			
	1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass
	2 PVC	4 ABS	6 Asbestos-Cement	8 Concrete Tile
	9 Other (Specify below)			
	Blank casing diameter <u>16</u> in.		Was casing pulled? Yes No <u>X</u>	
	Casing height above or below land surface <u>48</u> in.		If yes, how much	

6	GROUT PLUG MATERIAL:	1 Neat cement	2 <u>Cement grout</u>	3 Bentonite	4 Other
	GROUT PLUG INTERVALS:	From <u>4</u> ft.	to <u>31</u> ft.	From ft.	to ft.
	What is the nearest source of possible contamination:				
	1 Septic tank	6 Seepage pit	11 Fuel storage	16 Other (specify below)	
	2 Sewer lines	7 Pit privy	12 Fertilizer storage		
	3 Watertight sewer lines	8 Sewage lagoon	13 Insecticide storage		
	4 Lateral lines	9 Feedyard	14 Abandoned water well		
	5 Cess Pool	10 Livestock pens	15 Oil well/Gas well		
	Direction from well? <u>NONE WITHIN 1/4 mile</u> How many feet?				

FROM	TO	PLUGGING MATERIALS
0	4	Top Soil
4	31	Concrete Grout
31	61	SAND + GRAVEL

RECEIVED

OCT 11 2004

BUREAU OF WATER

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>10-1-04</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>138</u> This Water Well Record was completed on (mo/day/year) <u>10-1-04</u> under the business name of <u>PETERSON IRRIGATION</u> by (signature) <u>Mike Peterson</u>
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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: 785/296-3565. Send one to Water Well Owner and retain one for your records.