

MW-45

WATER WELL RECORD Form WWC-5 KSA 82a-1212 ID No.

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <u>Saline</u>	<u>SE</u> $\frac{1}{4}$ <u>NE</u> $\frac{1}{4}$ <u>NE</u> $\frac{1}{4}$ <u>SW</u>	<u>12</u>	T <u>14</u> S	R <u>3</u> EW

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

335 N. Front, Salina KSGarmin II GPS location 38.84697  
-97.60332

2 WATER WELL OWNER:	Board of Agriculture, Division of Water Resources
RR#, St. Address, Box # : <u>City of Salina</u> <u>300 W. Ash P.O. Box 736</u>	Application Number:
City, State, ZIP Code : <u>Salina KS 67401</u>	

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL <u>47'</u> ft. ELEVATION:
	Depth(s) Groundwater Encountered <u>1</u> <u>38</u> ft. 2 ..... ft. 3 ..... ft. WELL'S STATIC WATER LEVEL <u>33.80</u> ft. below land surface measured on <u>mo/day/yr</u> <u>10-15-04</u> Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm Est. Yield ..... gpm: Well water was ..... ft. after ..... hours pumping ..... gpm 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 Domestic (lawn & garden) 10 Monitoring well <u>MW-45 for KDHE-BER</u> <u>project 25-988-10919</u> Was a <u>chemical</u> <u>VOC's</u> bacteriological sample submitted to Department? Yes <u>X</u> No .....; If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes <u>No</u>

5 TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued ..... Clamped .....
1 Steel	3 RMP (SR)	9 Other (specify below)	Welded .....
2 <u>PVC</u>	4 ABS		Threaded <u>X</u>
Blank casing diameter <u>2" ID 2 1/4</u> in. to ..... ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.			
Casing height above land surface <u>flush to mount 0</u> in., weight ..... lbs./ft. Wall thickness or gauge No. ....			
TYPE OF SCREEN OR PERFORATION MATERIAL:	5 Fiberglass	8 RMP (SR)	10 Asbestos-Cement
1 Steel	6 Concrete tile	9 ABS	11 Other (Specify) .....
2 Brass			12 None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE:	5 Gauzed wrapped	8 Saw cut	11 None (open hole)
1 Continuous slot	6 Wire wrapped	9 Drilled holes	
2 Louvered shutter	7 Torch cut	10 Other (specify) .....	
3 <u>Mill slot</u>			
4 Key punched			
SCREEN-PERFORATED INTERVALS: From <u>37'</u> ft. to <u>47'</u> ft., From ..... ft. to ..... ft.			
GRAVEL PACK INTERVALS: From <u>33.6'</u> ft. to <u>47'</u> ft., From ..... ft. to ..... ft.			

6 GROUT MATERIAL:	1 Neat cement	2 Cement grout	3 <u>Bentonite</u>	4 Other <u>Quikrete sand mix cement</u>
Grout intervals: From <u>0'</u> ft. to <u>3'</u> ft., From <u>3'</u> ft. to <u>4.2'</u> ft., From <u>4.2'</u> ft. to <u>29.8'</u> 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
Direction from well?				13 Insecticide storage
				14 Abandoned water well
				15 Oil well/Gas well
				16 Other (specify below)
				<u>Carbonated, 1, 2 DCA</u>
				<u>contaminated sites</u>

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0'	5'	(Fill) Br lean clay tr rubble & debris	0'	3'	Quikrete sand mix cement
5'	18'	12 Br & Br lean clay	3'	4.2'	Bentonite hole plug
18'	28'	Br lean clay	4.2'	29.8'	Quikrete sand mix cement w/ sand
28'	31'	14 Br silty clay -> clayey silt tr w/ sand	29.8'	33.6'	Bentonite hole plug
31'	32'	Br silty clay tr f-m sand			
32'	35'	Br silty clay w/ f-m sand			
35'	48'	Br f-m sand tr gravel			
50'		Gr silty clay			

RECEIVED

OCT 18 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>10-12-04</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No <u>KDHE - BER</u> This Water Well Record was completed on (mo/day/yr) <u>10-15-04</u> under the business name of <u>KDHE</u> by (signature) <u>Scott Lang</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, 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.