

1 LOCATION OF WATER WELL: County: <u>Saline</u>	Fraction <u>SE 1/4 SW 1/4 NE 1/4</u>	Section Number <u>12</u>	Township Number <u>T 14 S</u>	Range Number <u>R 3 E</u>															
Distance and direction from nearest town or city street address of well if located within city? <u>202 N 5th Street</u>																			
2 WATER WELL OWNER: <u>Townsite Development</u>			Board of Agriculture, Division of Water Resources Application Number: <u>NWZR</u>																
RR#, St. Address, Box # : <u>202 N 5th St.</u> City, State, ZIP Code : <u>Salina, KS</u>																			
3 LOCATE WELL'S LOCATION WITHIN SECTION BOX:		4 DEPTH OF COMPLETED WELL <u>39</u> ft. ELEVATION: _____																	
AN "X" IN SECTION BOX: <div style="text-align: center;">             N  <table border="1" style="margin: auto; border-collapse: collapse;"> <tr><td style="width: 20px;"> </td><td style="width: 20px;"> </td><td style="width: 20px;"> </td></tr> <tr><td style="text-align: center;">NW</td><td style="text-align: center;">NE</td><td style="text-align: center;">E</td></tr> <tr><td style="text-align: center;">W</td><td></td><td style="text-align: center;">E</td></tr> <tr><td style="text-align: center;">SW</td><td style="text-align: center;">SE</td><td style="text-align: center;">S</td></tr> <tr><td style="text-align: center;"> </td><td style="text-align: center;"> </td><td style="text-align: center;"> </td></tr> </table> </div>					NW	NE	E	W		E	SW	SE	S				Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL <u>33.06</u> ft. below land surface measured on mo/day/yr <u>6/15/05</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: 1 Domestic 3 Feedlot 6 Oil field water supply 8 Air conditioning 11 Injection well 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) <input checked="" type="radio"/> Monitoring well 12 Other (Specify below) _____		
NW	NE	E																	
W		E																	
SW	SE	S																	
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 _____																			
5 TYPE OF BLANK CASING USED:																			
1 Steel 3 RMP (SR)		5 Wrought iron 8 Concrete tile		CASING JOINTS: Glued _____ Clamped _____															
<input checked="" type="radio"/> PVC 4 ABS		6 Asbestos-Cement 9 Other (specify below) _____		Welded _____															
		7 Fiberglass		Threaded _____															
Blank casing diameter _____ in. to _____ ft., Dia _____ in. to _____ ft.																			
Casing height above land surface _____ in., weight _____ lbs./ft. Wall thickness or gauge No. _____																			
TYPE OF SCREEN OR PERFORATION MATERIAL:																			
1 Steel 3 Stainless Steel 5 Fiberglass 8 RMP (SR)		10 Asbestos-Cement																	
2 Brass 4 Galvanized Steel 6 Concrete tile 9 ABS		11 Other (Specify) _____																	
		12 None used (open hole)																	
SCREEN OR PERFORATION OPENINGS ARE:																			
1 Continuous slot <input checked="" type="radio"/> Mill slot		5 Gauzed wrapped 8 Saw cut		11 None (open hole)															
2 Louvered shutter 4 Key punched		6 Wire wrapped 9 Drilled holes																	
		7 Torch cut 10 Other (specify) _____																	
SCREEN-PERFORATED INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.																			
GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.																			
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout <input checked="" type="radio"/> Bentonite 4 Other <u>0-2 Cement</u>																			
Grout Intervals: From _____ ft. to _____ 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 14 Abandoned water well																	
2 Sewer lines 5 Cess pool 8 Sewage lagoon		<input checked="" type="radio"/> Fuel storage 15 Oil well/Gas well																	
3 Watertight sewer lines 6 Seepage pit 9 Feedyard		12 Fertilizer storage 16 Other (specify below) _____																	
		13 Insecticide storage _____																	
Direction from well? _____ How many feet? _____																			
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS														
0	1	clay, brn, grading to med sand																	
		red, brn. moist, no odor.																	
4	6	Sand, med, reddish brn.																	
9	11	sand, med, brn/tan, slight moisture																	
39	TD																		

Flushmount  
Wavier by  
D. Taylor

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) 6/13/05 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No 757 This Water Well Record was completed on (mo/day/yr) 7/14/05 under the business name of Larsen & Associates, Inc by (signature) Kelly Ann