

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
	County: Saline	NE ¼ NE ¼ NE ¼	2	14	3 EW

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

1745 N. 9th Street, Salina

2	WATER WELL OWNER: Harry W. Steele Jr. RR #, St. Address, Box #: 104 N. Hilldale Rd. City, State, ZIP Code : Salina, KS 67401	Board of Agriculture, Division of Water Resources Application Number:
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3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL 30 ft. WELL'S STATIC WATER LEVEL Dry ft. WELL WAS USED AS: <div style="display: flex; justify-content: space-between;"> <div> 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial </div> <div> 5 Public Water Supply 6 Oil Field Water Supply 7 Domestic (Lawn & Garden) 8 Air Conditioning </div> <div> 9 Dewatering 10 Monitoring Well 11 Injection Well 12 Other vapor observation </div> </div>
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N

NW		NE
SW		SE

S
W
E

Was a chemical / bacteriological sample submitted to Department? Yes No **X**
If yes, mo/day/yr sample was submitted
Water Well Disinfected: Yes No **X**

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

6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout <input checked="" type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Other Concrete
	Grout Plug Intervals: From 0 ft. to 0.5 ft., From 0.5 ft. to 30 ft., From to ft.
	What is the nearest source of possible contamination:
	<div style="display: flex; justify-content: space-between;"> <div> 1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool </div> <div> 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens </div> <div> 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well </div> <div> <input checked="" type="checkbox"/> Other (specify below) Fmr UST basin </div> </div>
	Direction from well? How many feet?

FROM	TO	PLUGGING MATERIALS
0	0.5	Concrete
0.5	20	Bentonite (8")
20	30	Bentonite (2")

VOB2
KDHE #U5 085 00244
GeoCore #1005

7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 3/21/2006 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 527 This Water Well Record was completed on (mo/day/year) 3/23/2006 under the business name of GeoCore Inc. by (signature) <i>Don Bolt</i>
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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., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.