

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Saline</u>		<u>SE 1/4 SE 1/4 SW 1/4</u>	<u>24</u>	<u>T 14 S</u>	<u>R 3 E</u>
Distance and direction from nearest town or city street address of well if located within city?					
<u>In city limits- 1558 Austin Circle, Salina, KS</u>					
2 WATER WELL OWNER:		Board of Agriculture, Division of Water Resources			
RR#, St. Address, Box # :		Application Number: <u>N/A</u>			
City, State, ZIP Code :					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>45</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL <u>14</u> ft. below land surface measured on mo/day/yr <u>8/27/98</u>			
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Est. Yield <u>25-50</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Bore Hole Diameter... <u>8</u> in. to <u>4.7</u> ft., and _____ in. to _____ ft.			
		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 <u>X</u> Lawn and garden only 10 Monitoring well			
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> ; If yes, mo/day/yr sample was submitted _____			
		Water Well Disinfected? Yes <u>X</u> No _____			
5 TYPE OF BLANK CASING USED:		CASING JOINTS: Glued <u>X</u> Clamped _____			
1 Steel		Welded _____			
<u>X</u> 2 PVC		Threaded _____			
3 RMP (SR)					
4 ABS					
5 Wrought iron					
6 Asbestos-Cement					
7 Fiberglass					
8 Concrete tile					
9 Other (specify below)					
Blank casing diameter _____ in. to _____ ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.					
Casing height above land surface _____ in., weight _____ lbs./ft. Wall thickness or gauge No. <u>2.14</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:		10 Asbestos-cement			
1 Steel		8 RMP (SR)			
3 Stainless steel		11 Other (specify) _____			
2 Brass		12 None used (open hole)			
4 Galvanized steel					
6 Concrete tile					
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped			
1 Continuous slot		8 Saw cut			
<u>X</u> 2 Mill slot		11 None (open hole)			
3 Louvered shutter		6 Wire wrapped			
4 Key punched		9 Drilled holes			
7 Torch cut		10 Other (specify) _____			
SCREEN-PERFORATED INTERVALS: From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.					
6 GROUT MATERIAL:		4 Other _____			
1 Neat cement		<u>X</u> 3 Bentonite			
2 Cement grout					
Grout Intervals: From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.					
What is the nearest source of possible contamination:		10 Livestock pens			
1 Septic tank		14 Abandoned water well			
<u>X</u> 2 Sewer lines		11 Fuel storage			
3 Watertight sewer lines		15 Oil well/Gas well			
4 Lateral lines		12 Fertilizer storage			
5 Cess pool		16 Other (specify below) _____			
6 Seepage pit		13 Insecticide storage			
7 Pit privy					
8 Sewage lagoon					
9 Feedyard					
Direction from well? <u>East</u>		How many feet? <u>150</u>			
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	Top Soil			
2	11	Brown silty clay			
11	21	Red & Green Sandy Clay			
21	45	Medium to Coarse Tan Sand &			
		Gravel			
45	47	Green Shale			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>X</u> (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>8/27/98</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/yr) <u>9/11/98</u> under the business name of <u>Peterson Irrigation, Inc.</u> by (signature) <u>Mike Petersen</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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					