WAIL	W MELL	RECURD	r or m	** ** C-3	DIV	ISIOII OI W	ater Reso	urces; App. No			
1 LOC	ATION OI	WATER WELL:	Fraction	NE /	NE /	Section N	umber	Township N	lumber	Range Number	
Distance	and direction	on from nearest town	or city street	address of	well if C	lobal Pos	itionino	System (dee	imal dam	K 3 W	
County: Saline SW ½ NE ½ NE ½ 11 T 14 S R 3 W Distance and direction from nearest town or city street address of well if located within city? 732 N Broadway, Salina, KS 67401 WATER WELL OWNER: Something Else, LLC RR#, St. Address, Box # : PO Box 1305 RE 3 W Global Positioning System (decimal degrees, min. of 4 digits) Latitude: N 38.85321° Longitude: W 97.61647° Elevation: RIM: 1223.88; TOC: 1223.66 WGS84											
2 WATER WELL OWNER: Something Else, LLC Elevation: RIM: 1223.88; TOC: 1223.66										66	
RR#. St. Address Box # PO Box 1305							WGS84				
City.	State, ZIP (Code : Salina.	KS 67402			Data Coll	ection N	fethod: legal	survey		
City, State, ZIP Code : Salina, KS 67402 Data Collection Method: legal survey 3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL 34.12 ft.											
LOCATON MW4											
1	H AN "X"	(N Depth(s) Group	ndwater Enco	untered 1			ft. 2		ft. 3	ft	
1	TION BOX	: WELL'S STAT	TIC WATER	LEVEL	26.38 ft	below la	nd surfa	ce measured	on mo/d	ft. ay/yr 11/29/12	
	N	Pumr	test data: V	Vell water	was	ft.	after	hou	s numni	ng gpm	
		7 Est Vield	onm: V	Well water	was	1 07	after	hou	s numni	ng gpm	
	wk	WELL WATER	R TO BE US	FD AS: 5	Public wa	ter sunnly	, & Air	conditioning	ı 11 In	iection well	
	" '}-										
W SE BE 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify belo 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well Was a chemical/besterial scient complex submitted to Department? Ves No. V.: If yes ma/day/w										or (Specify below)	
										fyer moldey/im	
<u> </u>	S	Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/o Sample was submitted Water Well Disinfected? Yes No X									
5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued Clamped 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded											
1 St	eel	3 RMP (SR) 6	Asbestos-Ce	ment	9 Other (s	pecify be	low)		Welde	d	
(2)P	VC	4 ABS 7	Fiberglass		•		,		Thread	led X	
Blank cas	sing diamete	er 2 in. to	19.12 ft	Dia	iı	n. to	ft	Dia	in.	to ft	
2 PVC 4 ABS 7 Fiberglass Threaded X Blank casing diameter 2 in. to 19.12 ft., Dia in. to ft., Dia in. to ft. Casing height below land surface 0.22 ft., Weight lbs./ft. Wall thickness or gauge No.											
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass (7) PVC 9 ABS 11 Other (specify) 2 Bress 4 Galvanized steel 6 Congrete tile 8 RM (SR) 10 Ashestos Coment 12 None weed (open hole)											
1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 9 ABS 11 Other (specify)											
2 Diass 4 Carvainzed steel 0 Concrete tile 6 Rivi (SR) 10 Aspestos-Centent 12 None used (Open note)											
ISCREEN OF DEDEOD ATION OPENINGS ADE:											
1 Continuous slot 3 Mill slot 5 Gauze wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)											
1 Continuous slot 3 Mill slot 5 Gauze wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) SCREEN-PERFORATED INTERVALS: From 19.12 ft. to 34.12 ft. From ft. to											
SCREEN	-rekroka	TED INTERVALS:	From	19.12	. 11. 10	54.12	II. FIC	уш	II. IC)IL.	
CE	ANEL DA	TE TAITED VALC.	From	15	. 11. 10	24 20	II. FIC	уш	II. K	ft.	
Gr	CAVEL PA	CK INTERVALS:	From	<u>1</u> /	. 11. 10	34.30	H. FR)Ш	II. IC	ft.	
			From		. п. ю		n. Fro)m	II. IC	ft.	
6 GROUT MATERIAL: 1 Neat cement (2) Cement grout (3) Bentonite (4) Other Concrete: 0-1 ft Grout Intervals From 1 ft. to 14 ft. From 14 ft. to 17 ft. From ft. to ft.											
Grout Intervals From 1 ft. to 14 ft. From 14 ft. to 17 ft. From ft. to ft.											
What is the nearest source of possible contamination:											
	tic tank		es 7 Pit priv					cticide Stora		16 Other (specify	
	ver lines	5 Cess pool) Fuel sto			ndoned water		below)	
		er lines 6 Seepage p	it 9 Feedya					well/ gas wel	l ,		
Direction	from well?	SE		F	low many	feet? ~3	0 ft				
FROM	TO	LITHOL	OGIC LOG		FROM	TO		PLUGGIN	IG INTE	RVALS	
0	0.3	Asphalt									
0.3		Brown silty clay									
20	34.30	Gray silty clay									
					ļ	ļ					
		······································	· · · · · · · · · · · · · · · · · · ·				Flushm	ount waiver	from R	OW .	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Dens rucket (2) reconstructed, or (3) plugged											
under my jurisdiction and was completed on (mo/day/year)1/18/13 and this record is true to the best of my knowledge and belief.											
		tractor's License No					ompleted	on (mo/day/y	ear)2	/4/13	
		of Larsen & Asso			by (signatu			1	<u> </u>		
NSTRUCT	IONS: Please	fill in blanks or circle the	correct answers	. Send top th	ree copies to	Kansas De	partment d	Health and En	vironment	, Bureau of Water,	
INSTRUCTIONS: Please fill in blanks 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 the to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell											
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