WATEI	R WEI	L RECORD	Form W	WC-5	Division of Wate	r Resources App. N	o. L		
		OF WATER WELL:	Fraction	**************************************	Section Number	Township No.	Range N		
	ty: Sali		1/4 NE 1/4 NW		13	T 14 S	R 3	□E Z W	
	Street/Rural Address of Well Location; if unknown, distance & direction					Global Positioning System (GPS) information:			
from nearest town or intersection: If at owner's address, check here .					Latitude: .38,832647 (in decimal degrees) Longitude: 97.608128 (in decimal degrees)				
Salina Regional Health Center Parking Lot 501 South Santa Fe Avenue, Salina, KS 67401					Elevation: .1224				
					Datum: ☐ WGS 84, ☑ NAD 83, ☐ NAD 27				
2 WATER WELL OWNER: Salina Regional Health Center					Collection Method:				
RR#, Street Address, Box #: 400 South Santa Fe Avenue City, State, ZIP Code : Salina KS 67401					☐ GPS unit (Make/Model:) ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey				
City,	, Diate, Z.	IP Code : Salina, I	KS 67401	Est. Accuracy: \square <3 m, \square 3-5 m, \square 5-15 m, \square >15 m					
3 LOC		LL			<u> </u>	- 12 111, L	4		
	WITH AN "X" IN 4 DEPTH OF COMPLETED WELL 40								
SECT	SECTION BOX: Depth(s) Groundwater Encountered (1).37.60 ft. (2).N/A ft. (3).N/A ft. WELL'S STATIC WATER LEVEL 37.60ft. below land surface measured on mo/day/yr. 9-16-2013								
 	Pump test data: Well water was. N/Aft. after. N/A								
	TICE ATTENT TO NIZA TATALAN AND NIZA TATALAN NIZA TATALAN AND NIZA TATALAN NIZA TATALAN NIZA TATALAN NIZA TATALAN NIZA TATALAN NIZA TATALAN NI								
w NV	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1								
	WELL WATER TO BE USED AS: Public water supply Geothermal Injection well								
SW	gw gr Domestic Feedlot Oil field water supply Dewatering Other (Specify below)								
	☐ Irrigation ☐ Industrial ☐ Domestic-lawn & garden ☑ Monitoring well MW-8R								
	Was a chemical/bacteriological sample submitted to Department? Yes No If yes, mo/day/yr sample was submitted. N/A								
	1 mile		fected? Yes 4		******				
5 TYPE OF CASING USED: Steel PVC Other									
CASING JOINTS: Glued Clamped Welded Threaded									
Casing diameter .2 in. to .20 ft., Diameter .N/A in. to .N/A ft., Diameter .N/A in. to .N/A ft.									
Casing height above land surface. 0 in., Weight N/A lbs./ft., Wall thickness or gauge No. Schedule 40									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
☐ Steel ☐ Stainless Steel ☑ PVC ☐ Other (Specify)									
SCREEN OR PERFORATION OPENINGS ARE:									
☐ Continuous slot ☑ Mill slot ☐ Gauze wrapped ☐ Torch cut ☐ Drilled holes ☐ None (open hole)									
□ Louvered shutter □ Key punched □ Wire wrapped □ Saw cut □ Other (specify)									
From N/A ft to N/A ft From N/A ft to N/A ft									
GRAVEL PACK INTERVALS: From 18 ft. to 40 ft. From N/A ft to N/A ft									
From N/A ft. to N/A ft., From N/A ft. to N/A ft.									
GRAVEL PACK INTERVALS: From . 18 ft. to . 40 ft., From . N/A ft. to . N/A ft. From . N/A ft. to . N/A ft., From . N/A ft., From . N/A ft. to . N/A ft. GROUT MATERIAL: Neat cement Cement Grout Bentonite Other Concrete 0-2' Grout Intervals: From 2 ft. to . 18 ft., From . N/A ft. to . N/A ft., From . N/A ft., From . N/A ft., From . N/A ft. to . N/A ft. The									
Grout Intervals: From 4 ft. to .19 ft., From .1V.A ft. to .1V.A ft., From .1V.A ft. to .1V.A ft.									
What is the nearest source of possible contamination: Septic tank Lateral lines Pit privy Livestock pens Insecticide storage Other (specify below)									
Sewer lines									
Watertight sewer lines Seepage pit Feedyard Fertilizer storage Oil well/gas well									
		n well .West		The second secon	from well200-fee			**************************************	
FROM	TO 7	LITHOLOG	the state of the s	FROM	TO LITHO, LO	OG (cont.) <u>or</u> PLU	GGING I	NTERVALS	
7	29	Grass surface, brown some strown clayer silt	siity ciay			بيدي ويستنطب أحيدت أخيطها ويواده ويستودون	<u> </u>		
29	34	brown silty SAND fine	rain			· Confirmation and the second state of			
34	40	clear, orange sand me				and winds to get to be a real real real real real real real r			
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<u> </u>	<u> </u>	alamana da arabaharan da baran da arabaharan da arabahara				and the specific series of the second series of the second second second second second second second second se		**************************************	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION. This water well was 17 constructed 17 constructed 17 constructed 17									
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ✓ constructed, ☐ reconstructed, or ☐ plugged under my jurisdiction and was completed on (mo/day/year) .9.16-20.13 and this record is true to the best of my knowledge and belief.									
Kansas Water Well Contractor's License No. 759. This Water Well Record was completed on (mo/day/year) 9-28-2013									
under th	e busine	ss name ofRAZEK.Env	rironmental, LLC	andariaa karaasa a araa	. by (signature) 🗘	warp-079	whi	Magazina ara salahan ara ara ara	
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send one copy to									
Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at									

http://www.kdheks.gov/waterwell/index.html