WATER	WELL I	RECORD	Form WWC-5	Divisio	on of Wate	er Resour	rces; App. No.		
		TI PERSON XXIDE X	To live to live	So	ction Nur	nher	Township Number	Range Number	
County: Saline NE 1/2 NW 1/4 NW 1/2 12 T 14 S R 3 W Distance and direction from nearest town or city street address of well if Global Positioning System (decimal degrees, min. of 4 digits)									
Boosted within cityl) 942 N Conto He Ave Salina									
	•			Lo	ngitude:	NA			
2 WATER WELL OWNER: Something Else, LLC RR#, St. Address, Box # : P.O. Box 1305 City, State, ZIP Code : Salina, KS 67402						NA			
					atum:	NA tion Me	ethod: NA		
City, St	ate, ZIP Co	de : Salina,	KS 67402				ft.		
3 LOCATE WELL'S 4 DEPTH OF CONTLETED WELL 34.45									
LOCA'		T (1 (1) Curain	dwater Encountered 1	1	AT AA 2	ft 2	ft. 3	ft.	
	AN "X" IN	EXXTENT TO A COURT A CO		75 ON 11 P	reiow lan	a surtac	e measured on more	1av/vi 1/30/14	
SECTI	SECTION BOX: N Pump test data: Well water was X Est. Yield gpm: Well water was Fi. after hours pumping gpm Est. Yield gpm: Well water was ft. after hours pumping gpm Est. Yield gpm: Well water was ft. after hours pumping gpm Est. Yield gpm: Well water was ft. after hours pumping gpm								
- T	Fig. Vield onm. Well water was ft. after hours pumping gpm								
TO THE TAXABLE TO BE IN BUT AND A STREET TO BE IN BUT AND A STREET THE CONTINUE OF THE PROPERTY OF THE PROPERT									
I NVV		1 Domestic 3	Feed lot 6 Oil field w	ater supply		9 Dewat	tering 12 Oth	ner (Specify below)	
w 	WELL WATER TO BE USED AS: 3 Tuble water supply WELL WATER TO BE USED AS: 3 Tuble water supply 1 Domestic 3 Feed lot 6 Oil field water supply 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 12 Other (Specify below)								
9\/\									
	Was a chemical/hacteriological sample submitted to Department? Yes No A , 11 yes, 110/day/yis								
<u> </u>	S	Sample was su	hmitted		W	ater We	ell Disinfected? Yes	s NO X	
Sample was submitted Sample was submitted Water Well Disinfected? Yes No X Sample was submitted Submitted Submitted Value Well Disinfected? Yes No X Submitted Submitt									
3 TITE	or Cash	RMP (SR) 6	Asbestos-Cement	Other (sp	ecify bel	ow)	Weld	ed	
O PV	Threaded X								
Blank easing diameter 2 in to 19.45 ft Dia in to						ft.,	Dia in	i. to ft.	
Casing height helow land surface ft., Weight lbs./ft. Wall thickness or gauge No.									
Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Threaded X Other (specify below) Threaded X Blank casing diameter 2 in to 19.45 ft., Dia in to ft., Dia in to ft. Casing height below land surface ft., Weight Ibs./ft. Wall thickness or gauge No. TYPE OF SCREEN OR PERFORATION MATERIAL: TYPE OF SCREEN OR PERFORATION MATERIAL: Other (specify) Other (specify)									
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass (7) PVC 9 ABS 11 Other (specify) 2 Brass 4 Galvanized steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)									
2 Bra	iss 4 Galv	anized steel 6 Co	oncrete tile 8 RM (SK)	10 Ast	besios-Ce	mem	12 None used (ope	on noic)	
SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous elet									
SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 3 Mill slot 5 Gauze wrapped 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) SCREEN-PERFORATED INTERVALS: From 19.45 ft. to 34.45 ft. From ft. to ft. From ft. The first fill ft. From ft. The fill ft. From ft. From ft. The fill ft. From ft. Fr									
SCREEN-PERFORATED INTERVALS: From 19.45 ft. to 34.45 ft. From ft. to ft.									
From ft. to ft. From ft. to ft.									
GRAVEL PACK INTERVALS: From 18 ft. to 34.70 ft. From ft. to 11.									
From ft. to ft. From ft. to ft.									
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Concrete: 0-1ft									
Grout Intervals From 1 ft. to 18 ft. 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 13 Insecticide Storage 16 Other (specify)									
2 Sew	er lines	5 Cess poo		Fuel stor	age		well/ gas well	octow)	
3 Wat	ertight sew	er lines 6 Seepage		Tow many			WCIII Bas Woli		
Direction		Northwest	*********				PLUGGING IN	PEDMAT C	
FROM	TO		LOGIC LOG	FROM	TO		PLUGGING IN.	IENVALO	
0	0.5	Concrete							
0.5 10	10 15	Brown silty clay Brown sandy clay	fine grained						
15	20	Gray sandy clay,	fine grained						
20	25	Gray sand, fine g	rained						
25	34.70	Gray sand, medic	ım grained						
					<u> </u>				
						Flushn	nount waiver from	BOW	
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) Kansas Water Well Contractor's License No. 757 This Water Well Record was completed on (mo/day/year) 2/18/14									
Kansas Wa	iter Well Con	tractor's License No	. 757 This Wa	ater Well Re	cord was c	complete	g on (mo/day/year)_	4/10/14	
	and the state of t	e of Larsen & As		by (signatu	Vanaga De	mortmide	o Health and Environm	ent 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 WATER WELL OWNER and retain one for Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send the WATER WELL OWNER and retain one for Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send the WATER WELL OWNER and retain one for Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522.									
your records. Fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell.									