

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: Saline	Fraction SW ¼ NE ¼ NE ¼	Section Number 11	Township Number T 14 S	Range Number R 3 W
Distance and direction from nearest town or city street address of well if located within city? 720 N Broadway Blvd, Salina, KS 67401		Global Positioning System (decimal degrees, min. of 4 digits) Latitude: N 38.85270° Longitude: W 97.61658° Elevation: RIM: 1223.49; TOC: 1223.08 Datum: WGS84 NAD27 - per surveyor Data Collection Method: legal survey		

2 WATER WELL OWNER: Something Else, LLC
 RR#, St. Address, Box # : **PO Box 1305**
 City, State, ZIP Code : **Salina, KS 67402**

(KGS)

3 LOCATE WELL'S LOCATON WITH AN "X" IN SECTION BOX:

N		E	
W	SW	SE	X
S		E	

4 DEPTH OF COMPLETED WELL 34.63 ft.
MW16
 Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.
 WELL'S STATIC WATER LEVEL **25.10** ft. below land surface measured on **mo/day/yr 7/17/14**
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) **10 Monitoring well**

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 CASING USED:

1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	CASING JOINTS: Glued _____ Clamped _____
2 PVC	4 ABS	7 Fiberglass		Welded _____ Threaded X

Blank casing diameter **2** in. to **19.63** ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height below land surface **0.41** 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 Brass	4 Galvanized steel	6 Concrete tile	8 RM (SR)	10 Asbestos-Cement	12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

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 **19.63** ft. to **34.63** ft. From _____ ft. to _____ ft.
 From _____ ft. to _____ ft. From _____ ft. to _____ ft.
GRAVEL PACK INTERVALS: From **18** ft. to **35.10** ft. From _____ ft. to _____ ft.
 From _____ ft. to _____ ft. From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement **2 Cement grout** **3 Bentonite** **4 Other Concrete: 0-15 ft**
 Grout Intervals From **15** 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 below)
2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage	14 Abandoned water well	
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage	15 Oil well/ gas well	

Direction from well? **NE** How many feet? **~175 ft**

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	10	Gravel on top; brown silty clay			
10	25	Gray silty clay			
25	35.1	Fine gray sand			

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) **7/14/14** and this record is true to the best of my knowledge and belief.
 Kansas Water Well Contractor's License No. **757**. This Water Well Record was completed on (mo/day/year) **8/7/14**
 under the business name of **Larsen & Associates, Inc.** by (signature) _____

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 one 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>.

TRITERRA LAND SERVICES

P.O. Box 546
Clearwater, Kansas 67026
Cell (316) 648-3617 Fax (620) 584-4371
E-mail: triterrals@yahoo.com

SURVEY OF ADDITIONAL MONITORING WELLS STEVE'S COASTAL SERVICE SALINA, KANSAS

The site is located in the NE/4 of Section 11, Township 14 South, Range 3 West of the Sixth Principal Meridian, Saline County, Kansas. The Southeast corner of Section 11 was assigned coordinates of 00.00 North and 00.00 West.

The control point established during the previous survey was used for vertical control and is described as: an 'X' chiseled on the south end of the former east pump island, now the base of a light pole.

The Latitude and Longitude were scaled from a 7.5' quad map titled "Salina".

ID	NORTH	WEST	LATITUDE	LONGITUDE	ELEVATION
SE CORNER 11-14S-3W	00.00	00.00			
CP	4232.12	1098.16	38.85332	97.61613	1223.78
MW-15 SW SW NE NE	4104.93	1298.89	38.85299	97.61682	RIM 1223.70 TOC 1223.41
MW-16 SW SW NE NE	4008.20	1226.14	38.85270	97.61658	RIM 1223.49 TOC 1223.08
MW-17 SE SE NW NE	4186.05	1363.59	38.85318	97.61706	RIM 1223.53 TOC 1222.96
MW-18 SE SE NW NE	4003.00	1453.03	38.85268	97.61736	RIM 1223.35 TOC 1222.94
MW-19 NW NW SE NE	3923.49	1257.12	38.85247	97.61670	RIM 1223.41 TOC 1223.02
MW-20 NW NW SE NE	3920.70	1094.95	38.85244	97.61613	RIM 1223.61 TOC 1223.22
MW-21 SE SW NE NE	4036.24	693.06	38.85279	97.61469	RIM 1223.35 TOC 1222.93
MW-22 SW SE NE NE	4204.97	507.73	38.85324	97.61405	RIM 1221.76 TOC 1221.42
MW-23 NE SW NE NE	4345.85	660.22	38.85362	97.61458	RIM 1222.48 TOC 1222.18

