

1 LOCATION OF WATER WELL:		Fraction		Section Number	Township Number	Range Number																																																																																				
County: Saline		NE ¼ NW ¼ NW ¼		13	T 14 S	R 3 EW																																																																																				
Distance and direction from nearest town or city street address of well if located within city? 2118 Planet Ave., Salina																																																																																										
2 WATER WELL OWNER: Jim's Formal Wear																																																																																										
RR#, St. Address, Box # : 2118 Planet Avenue				Board of Agriculture, Division of Water Resources																																																																																						
City, State, ZIP Code : Salina, Kansas 67401				Application Number:																																																																																						
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: 50 ft ELEVATION: 1241.47																																																																																								
		Depth(s) Groundwater Encountered 1. _____ ft 2. _____ ft 3. _____ ft																																																																																								
		WELL'S STATIC WATER LEVEL 24.34 ft. below land surface measured on mo/day/yr 5/19/2019																																																																																								
		Pump test data: Well water was NA ft. after _____ hours pumping _____ gpm																																																																																								
		Est. Yield NA gpm: Well water was _____ ft. after _____ hours pumping _____ gpm																																																																																								
		Bore Hole Diameter 8 in. to 50 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 7 Lawn and garden only 10 Monitoring well																																																																																										
Was a chemical/bacteriological sample submitted to Department? Yes _____ No ☒ If yes, mo/day/yr sample was submitted _____																																																																																										
Water Well Disinfection? Yes _____ No ☒																																																																																										
5 TYPE OF BLANK CASING USED:																																																																																										
1 Steel		3 RMP (SR)		5 Wrought iron		8 Concrete tile																																																																																				
2 PVC		4 ABS		6 Asbestos-Cement		9 Other (specify below)																																																																																				
				7 Fiberglass																																																																																						
Blank casing diameter _____ in. to _____ ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.																																																																																										
Casing height above land surface -4.2 in., weight _____ lbs./ft. Wall thickness or gauge No. Sch. 40																																																																																										
TYPE OF SCREEN OR PERFORATION MATERIAL																																																																																										
1 Steel		3 Stainless steel		5 Fiberglass		7 PVC																																																																																				
2 Brass		4 Galvanized steel		6 Concrete tile		8 RMP (SR)																																																																																				
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						11 Other (specify) _____																																																																																				
						12 None used (open hole)																																																																																				
SCREEN OR PERFORATION OPENINGS ARE:																																																																																										
1 Continuous slot		3 Mill slot		5 Gauzed wrapped		8 Saw cut																																																																																				
2 Louvered shutter		4 Key punched		6 Wire wrapped		9 Drilled holes																																																																																				
				7 Torch cut		10 Other (specify) _____																																																																																				
						11 None (open hole)																																																																																				
SCREEN-PERFORATED INTERVALS: From 40 ft. to 50 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.																																																																																										
GRAVEL PACK INTERVALS: From 38 ft. to 50 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.																																																																																										
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Concrete																																																																																										
Grout Intervals: From 0 ft. to 2 ft. From 2 ft. to 38 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																																																																																				
2 Sewer lines		5 Cess pool		8 Sewage lagoon		11 Fuel storage																																																																																				
3 Watertight sewer lines		6 Seepage pit		9 Feedyard		12 Fertilizer storage																																																																																				
						13 Insecticide storage																																																																																				
						14 Abandoned water well																																																																																				
						15 Oil well/Gas well																																																																																				
						16 Other (specify below)																																																																																				
Direction from well? _____ How many feet? _____																																																																																										
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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) 5/18/2016 and this record is true to the best of my knowledge and belief.																																																																																										
Kansas Water Well Contractor's License No. 527 This Water Well Record was completed on (mo/day/yr) 5/31/2016																																																																																										
under the business name of GeoCore, Inc. by (signature) <i>Bob A. Hill</i>																																																																																										

OFFICE USE ONLY

T

R

EW

SEC.

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