

1 LOCATION OF WATER WELL:		Fraction	Section Number		Township Number		Range Number					
County: <b>SALINE</b>		<b>NW 1/4 NE 1/4 SW 1/4</b>	<b>1</b>		<b>T 14 S</b>		<b>R 3 EW</b>					
Distance and direction from nearest town or city street address of well if located within city? <b>NORTH END OF SANTA FE</b>												
2 WATER WELL OWNER: <b>ST. JOHN'S MILITARY SCHOOL</b>												
RR# St. Address, Box # <b>NORTH END OF SANTA FE</b> Board of Agriculture, Division of Water Resources												
City, State, ZIP Code <b>SALINA, KS. 67401</b> Application Number:												
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:			4 DEPTH OF COMPLETED WELL <b>56</b> ft. ELEVATION: <b>1216</b>									
<div style="text-align: center;">N 1 Mile W E S</div> <table border="1" style="margin: auto; text-align: center;"><tr><td>NW</td><td>NE</td></tr><tr><td>SW</td><td>SE</td></tr></table>			NW	NE	SW	SE	Depth(s) Groundwater Encountered <b>1 28</b> ft. 2. ft. 3. ft.					
			NW	NE								
			SW	SE								
			WELL'S STATIC WATER LEVEL <b>28</b> ft. below land surface measured on mo/day/yr <b>7-16-92</b>									
			Pump test data: Well water was <b>32</b> ft. after <b>1</b> hours pumping <b>30</b> gpm									
Est. Yield <b>100</b> gpm Well water was ft. after hours pumping gpm												
Bore Hole Diameter <b>9</b> in. to <b>56</b> ft. and in. to ft.												
WELL WATER TO BE USED AS: 1 Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well 2 Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering 12 Other (Specify below) <b>7 Lawn and garden only</b> 10 Monitoring well												
Was a chemical/bacteriological sample submitted to Department? Yes No <b>X</b> If yes, mo/day/yr sample was submitted												
Water Well Disinfected? Yes <b>X</b> No												
5 TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued <b>X</b> Clamped 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded 7 Fiberglass Threaded												
Blank casing diameter <b>5</b> in. to <b>36</b> ft. Dia. in. to ft. Dia. in. to ft.												
Casing height above land surface <b>15</b> in. weight <b>160</b> lbs./ft. Wall thickness or gauge No. <b>SDR 26</b>												
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement 2 Brass 4 Galvanized steel 6 Concrete tile 9 RMP (SR) 11 Other (specify) 12 None used (open hole)												
SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 3 Mill slot <b>.030</b> 5 Gauzed wrapped 8 Saw cut 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes 7 Torch cut 10 Other (specify)												
SCREEN-PERFORATED INTERVALS: From <b>36</b> ft. to <b>56</b> ft. From ft. to ft.												
GRAVEL PACK INTERVALS: From <b>25</b> ft. to <b>56</b> ft. From ft. to ft.												
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout <u>3 Bentonite</u> 4 Other												
Grout Intervals: From <b>0</b> ft. to <b>25</b> 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 14 Abandoned water well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well <u>3 Watertight sewer lines</u> 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below) 13 Insecticide storage												
Direction from well? <b>SOUTHWEST</b> How many feet? <b>60</b>												
FROM TO LITHOLOGIC LOG			FROM TO PLUGGING INTERVALS									
0 3 TOP SOIL												
3 15 CLAY GRAY												
15 37 SAND FINE												
37 41 CLAY GRAY												
41 56 SAND MED. TO COARSE												
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) <b>7-16-92</b> and this record is true to the best of my knowledge and belief. Kansas												
Water Well Contractor's License No. <b>388</b> This Water Well Record was completed on (mo/day/yr) <b>7-16-92</b>												
under the business name of <b>PESTINGER PUMP SERVICE</b> by (signature) <i>Paul Pestinger</i>												
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001 Telephone: 913-296-5545 Send one to WATER WELL OWNER and retain one for your records.												

OFFICE USE ONLY

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