

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number		
County: <u>SALINE</u>		<u>NE</u> $\frac{1}{4}$ <u>SE</u> $\frac{1}{4}$ <u>NE</u> $\frac{1}{4}$	<u>5</u>	T <u>14</u> S	R <u>3</u> E/W		
Distance and direction from nearest town or city?			Street address of well if located within city?				
			<u>1221 PARKWOOD</u>				
2 WATER WELL OWNER: <u>DONALD PLUMMER</u>							
RR#, St. Address, Box #: <u>1221 PARKWOOD</u>				Board of Agriculture, Division of Water Resources			
City, State, ZIP Code: <u>SALINA, KS 67401</u>				Application Number:			
3 DEPTH OF COMPLETED WELL: <u>50</u> ft. Bore Hole Diameter: <u>8 1/2</u> in. to <u>50</u> ft. and _____ in. to _____ ft.							
Well Water to be used as:							
1 Domestic		5 Public water supply		8 Air conditioning			
3 Feedlot		6 Oil field water supply		11 Injection well			
2 Irrigation		4 Industrial		9 Dewatering			
<input checked="" type="checkbox"/> Lawn and garden only		10 Observation well		12 Other (Specify below)			
Well's static water level: <u>19</u> ft. below land surface measured on _____ month <u>17</u> day <u>83</u> year							
Pump Test Data: Well water was <u>20</u> ft. after _____ hours pumping _____ gpm							
Est. Yield <u>75+</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm							
4 TYPE OF BLANK CASING USED:							
1 Steel		3 RMP (SR)		8 Concrete tile			
<input checked="" type="checkbox"/> PVC		4 ABS		9 Other (specify below)			
2 Brass		5 Fiberglass		Casing Joints: Glued <input checked="" type="checkbox"/> Clamped _____			
3 Stainless steel		6 Asbestos-Cement		Welded _____			
4 Galvanized steel		7 Concrete tile		Threaded _____			
5 Fiberglass		8 RMP (SR)		10 Asbestos-cement			
6 Concrete tile		9 ABS		11 Other (specify)			
7 Gauzed wrapped		10 Other (specify)		12 None used (open hole)			
8 Wire wrapped		11 None (open hole)					
9 Drilled holes							
10 Other (specify)							
Screen or Perforation Openings Are:							
1 Continuous slot		3 Mill slot		5 Saw cut			
2 Louvered shutter		4 Key punched		6 Wire wrapped			
7 Torch cut				9 Drilled holes			
8 Other (specify)				10 Other (specify)			
Screen-Perforation Dia: <u>5</u> in. to <u>5</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.							
Screen-Perforated Intervals: From <u>45</u> ft. to <u>50</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.							
Gravel Pack Intervals: From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.							
5 GROUT MATERIAL: <input checked="" type="checkbox"/> Neat cement 2 Cement grout 3 Bentonite 4 Other _____							
Grouted Intervals: From <u>1</u> ft. to <u>10</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.							
What is the nearest source of possible contamination:							
1 Septic tank		4 Cess pool		7 Sewage lagoon			
2 Sewer lines		5 Seepage pit		8 Feed yard			
3 Lateral lines		6 Pit privy		9 Livestock pens			
10 Fuel storage		11 Fertilizer storage		14 Abandoned water well			
12 Insecticide storage		15 Oil well/Gas well		16 Other (specify below)			
<input checked="" type="checkbox"/> Watertight sewer lines							
Direction from well: <u>NORTH</u> How many feet: <u>12</u> ? Water Well Disinfected? Yes _____ No <input checked="" type="checkbox"/>							
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, date sample was submitted _____ month _____ day _____ year							
Pump Installed? Yes <input checked="" type="checkbox"/> No _____							
If Yes: Pump Manufacturer's name: <u>RED JACKET</u> Model No. <u>CN 932</u> HP <u>1/2</u> Volts <u>200</u>							
Depth of Pump Intake: <u>40</u> ft. Pumps Capacity rated at <u>10</u> gal. min.							
Type of pump: <input checked="" type="checkbox"/> Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other _____							
6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on _____ month _____ day _____ year							
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>388</u>							
This Water Well Record was completed on _____ month _____ day _____ year							
name of <u>PESTINGER PUMP SER.</u> by (signature) <u>Paul Pestinger</u> _____ year under the business							
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
		1	12	TOP SOIL			
		13	31	SANDY LOAM			
		32	30	CLAY			
		34	40	MED GRAVEL			
		50		CLAY			
ELEVATION:							
Depth(s) Groundwater Encountered 1. <u>18</u> ft. 2. _____ ft. 3. _____ ft. 4. _____ ft. (Use a second sheet if needed)							

OFFICE USE ONLY

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R

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FW

SEC

NE 1/4 SE 1/4 NE 1/4

NE 1/4