

LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number		
County: <u>SALINE</u>		<u>NW 1/4 SW 1/4 SW 1/4</u>	<u>8</u>	<u>T 14 S</u>	<u>R 3</u>		
Distance and direction from nearest town or city? <u>2 mi. West of SALINA, KS.</u>			Street address of well if located within city?				
WATER WELL OWNER: <u>Raymond Kline</u>							
R#, St. Address, Box # : <u>RR #1</u>			Board of Agriculture, Division of Water Resources				
City, State, ZIP Code : <u>SALINA, KS 67401</u>			Application Number:				
DEPTH OF COMPLETED WELL: <u>62</u> ft. Bore Hole Diameter: <u>8</u> in. to <u>62</u> ft., and in. to ft.							
Well Water to be used as:							
<input checked="" type="checkbox"/> Domestic		3 Feedlot	6 Oil field water supply	8 Air conditioning	11 Injection well		
<input type="checkbox"/> 2 Irrigation		4 Industrial	7 Lawn and garden only	9 Dewatering	12 Other (Specify below)		
Well's static water level: <u>17</u> ft. below land surface measured on <u>10</u> month <u>28</u> day <u>80</u> year							
Pump Test Data: Well water was <u>21</u> ft. after <u>2</u> hours pumping. <u>15</u> gpm							
Static Yield <u>30-50</u> gpm: Well water was ft. after hours pumping gpm							
TYPE OF BLANK CASING USED:							
<input checked="" type="checkbox"/> 1 Steel		3 RMP (SR)	6 Asbestos-Cement	8 Concrete tile	Casing Joints: Glued <input checked="" type="checkbox"/> Clamped		
<input checked="" type="checkbox"/> 2 PVC		4 ABS	7 Fiberglass	9 Other (specify below)	Welded		
Blank casing dia. <u>5</u> in. to <u>42</u> ft., Dia. in. to ft., Dia. in. to ft.							
Casing height above land surface: <u>18</u> in., weight <u>2.91</u> lbs./ft. Wall thickness or gauge No. <u>265</u>							
TYPE OF SCREEN OR PERFORATION MATERIAL:							
<input type="checkbox"/> 1 Steel		3 Stainless steel	5 Fiberglass	8 RMP (SR)	10 Asbestos-cement		
<input type="checkbox"/> 2 Brass		4 Galvanized steel	6 Concrete tile	9 ABS	11 Other (specify)		
Screen or Perforation Openings Are:							
<input type="checkbox"/> 1 Continuous slot		<input checked="" type="checkbox"/> 3 Mill slot	5 Gauzed wrapped	8 Saw cut	11 None (open hole)		
<input type="checkbox"/> 2 Louvered shutter		4 Key punched	6 Wire wrapped	9 Drilled holes			
Screen-Perforation Dia. <u>5</u> in. to <u>62</u> ft., Dia. in. to ft., Dia. in. to ft.							
Screen-Perforated Intervals: From <u>42</u> ft. to <u>62</u> ft., From ft. to ft., From ft. to ft.							
Travel Pack Intervals: From <u>15</u> ft. to <u>62</u> ft., From ft. to ft., From ft. to ft.							
GROUT MATERIAL: <input checked="" type="checkbox"/> 1 Neat cement							
Grouted Intervals: From <u>5</u> ft. to <u>15</u> ft., From ft. to ft., From ft. to ft.							
What is the nearest source of possible contamination:							
<input type="checkbox"/> 1 Septic tank		4 Cess pool	7 Sewage lagoon	10 Fuel storage	14 Abandoned water well		
<input type="checkbox"/> 2 Sewer lines		5 Seepage pit	8 Feed yard	11 Fertilizer storage	15 Oil well/Gas well		
<input checked="" type="checkbox"/> 3 Lateral lines		6 Pit privy	9 Livestock pens	12 Insecticide storage	16 Other (specify below)		
Direction from well <u>SE</u> How many feet <u>100</u> ? Water Well Disinfected? Yes <input checked="" type="checkbox"/> No							
Has 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 No <input checked="" type="checkbox"/>							
Yes: Pump Manufacturer's name Model No. HP Volts							
Depth of Pump Intake ft. Pumps Capacity rated at gal./min.							
Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other							
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (<input checked="" type="checkbox"/> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was							
Completed on <u>10</u> month <u>28</u> day <u>80</u> year							
And this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>138</u>							
This Water Well Record was completed on <u>11</u> month <u>28</u> day <u>80</u> year under the business							
Name of <u>PETERSON IRRIGATION INC.</u> by (signature) <u>Mike Peterson</u>							
LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
		0	4	Top Soil			
		4	10	Soft Buff Clay			
		10	26	Brown Clay			
		26	35	Gray Clay			
		35	38	Gray Sandy Clay			
		38	45	FINE SAND + CLAY			
		45	52	CREEK SAND + GRAVEL			
		52	56	GRAY CLAY			
56	62	CREEK SAND + GRAVEL					
62	65	GRAY SHALE					
ELEVATION:							
Depth(s) Groundwater Encountered 1. <u>38</u> ft. 2. ft. 3. ft. 4. ft.						(Use a second sheet if needed)	

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, Division of Environment, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.