

LOCATION OF WATER WELL	Fraction	Section Number	Township Number	Range Number
County: Saline	SE 1/4 NW 1/4 NE 1/4	116	T 14 S	R 3 E (W)

Distance and direction from nearest town or city? **1/2 mile West**

Street address of well if located within city?

WATER WELL OWNER: **FARMERS Union Coop**R#, St. Address, Box #: **821 N. Broadway**
City, State, ZIP Code: **Salina, KANSAS 67401**

Board of Agriculture, Division of Water Resources

Application Number:

DEPTH OF COMPLETED WELL: **63'** ft. Bore Hole Diameter: **8 1/2"** in. to **63'** ft., and in. to ft.

Well Water to be used as:

- | | | | | |
|--------------|--------------|--------------------------|-----------------------|--------------------------|
| 1 Domestic | 3 Feedlot | 6 Oil field water supply | 9 Dewatering | 11 Injection well |
| 2 Irrigation | 4 Industrial | 7 Lawn and garden only | (10) Observation well | 12 Other (Specify below) |

Well's static water level: **20'** ft. below land surface measured on **1** month **20** day **82** year

Pump Test Data: Well water was ft. after hours pumping gpm

Test Yield: **100+** gpm: Well water was ft. after hours pumping gpm

TYPE OF BLANK 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 |

Blank casing dia: **4"** in. to **15"** ft., Dia in. to ft., Dia in. to ft.Casing height above land surface: **18'** in., weight **160** lbs./ft. Wall thickness or gauge No. **SDR 26**

TYPE OF SCREEN OR PERFORATION MATERIAL:

- | | | | | |
|---------|--------------------|-----------------|------------|--------------------------|
| 1 Steel | 3 Stainless steel | 5 Fiberglass | 8 RMP (SR) | 11 Other (specify) |
| 2 Brass | 4 Galvanized steel | 6 Concrete tile | 9 ABS | 12 None used (open hole) |

Screen or Perforation Openings Are:

- | | | | | |
|--------------------|---------------|------------------|-----------------|---------------------|
| 1 Continuous slot | 3 Mill slot | 5 Gauzed wrapped | (8) Saw cut | 11 None (open hole) |
| 2 Louvered shutter | 4 Key punched | 6 Wire wrapped | 9 Drilled holes | |

Screen-Perforation Dia: **4"** in. to **63'** ft., Dia in. to ft., Dia in. to ft.Screen-Perforated Intervals: From **15'** ft. to **63'** ft., From ft. to ft., From ft. to ft.

From ft. to ft., From ft. to ft., From ft. to ft.

Gravel Pack Intervals: From **12'** ft. to **63'** ft., From ft. to ft., From ft. to ft.

From ft. to ft., From ft. to ft., From ft. to ft.

GROUT MATERIAL:

- | | | | |
|---------------|----------------|---------------|---------|
| 1 Neat cement | 2 Cement grout | (3) Bentonite | 4 Other |
|---------------|----------------|---------------|---------|

Grouted Intervals: From **3'** ft. to **12'** 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 | 10 Fuel storage | 14 Abandoned water well |
| 2 Sewer lines | 5 Seepage pit | 8 Feed yard | 11 Fertilizer storage | 15 Oil well/Gas well |
| 3 Lateral lines | 6 Pit privy | 9 Livestock pens | 12 Insecticide storage | 16 Other (specify below) |

Direction from well: **West** How many feet: **20** Water Well Disinfected? Yes No **X**Has a chemical/bacteriological sample submitted to Department? Yes No **X** If yes, date sample

as submitted month day year: Pump Installed? Yes No

Yes: Pump Manufacturer's name Model No. HP Volts

Depth of Pump Intake ft. Pumps Capacity rated at gal./min.

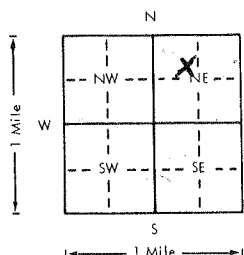
Type of pump:

- | | | | | | |
|---------------|-----------|-------|---------------|-----------------|---------|
| 1 Submersible | 2 Turbine | 3 Jet | 4 Centrifugal | 5 Reciprocating | 6 Other |
|---------------|-----------|-------|---------------|-----------------|---------|

CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was

Completed on **1** month **20** day **82** yearand this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **388**This Water Well Record was completed on **1** month **20** day **82** year under the businessName of **Pestinger Pump Ser.** by (signature) **Paul Pestinger**

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



FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	2	DRIVEWAY ROCK			
2	7	TOP SOIL			
7	13	CLAY - BROWN			
13	19	CLAY - BLACK			
19	27	SAND - VERY FINE			
27	29	CLAY - BROWN			
29	44	SAND - FINE - BROWN			
44	46	GRAVEL - BROWN CREEK			
46	47	CLAY - GRAY			
47	57	SAND - FINE - NATIVE			
57	63	GRAVEL - MED - NATIVE			

ELEVATION: Depth(s) Groundwater Encountered 1. **20** ft. 2. **29** ft. 3. **47** 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.