WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL: Fraction: NE ¼ SW ¼ NE ¼ | Section Number: 23 | Township Number: T 14 S | Range Number: R 3 E/W
County: Saline
Distance and direction from nearest town or city?
Street address of well if located within city? 660 S. 12

2 WATER WELL OWNER: Vernon Miller
RR#, St. Address, Box # : 660 S. 12
City, State, ZIP Code : Salina, Ks. 67401
Board of Agriculture, Division of Water Resources Application Number:

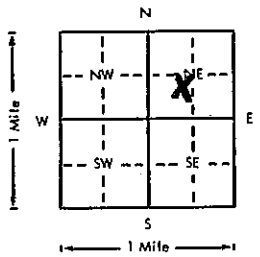
3 DEPTH OF COMPLETED WELL 53 ft. Bore Hole Diameter 8½ in. to 53 ft., and ..... in. to ..... ft.
Well Water to be used as: 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial 5 Public water supply 6 Oil field water supply X Lawn and garden only 8 Air conditioning 9 Dewatering 10 Observation well 11 Injection well 12 Other (Specify below) .....
Well's static water level 34 ft. below land surface measured on 4 month 13 day 81 year
Pump Test Data: Well water was 40 ft. after 1 hours pumping 81 gpm
Est. Yield 75 gpm: Well water was ..... ft. after ..... hours pumping ..... gpm

4 TYPE OF BLANK CASING USED: 1 Steel 2 PVC X RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below) .....
Casing Joints: Glued X Clamped ..... Welded ..... Threaded .....
Blank casing dia 5 in. to 47 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.
Casing height above land surface 12 in., weight 200 lbs./ft. Wall thickness or gauge No 214
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 6 Concrete tile 7 PVC X RMP (SR) 9 ABS 10 Asbestos-cement 11 Other (specify) ..... 12 None used (open hole)
Screen or Perforation Openings Are: 1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut X Saw cut 9 Drilled holes 10 Other (specify) ..... 11 None (open hole)
Screen-Perforation Dia 47 in. to 53 ft., Dia ..... in. to ..... ft., Dia ..... in to ..... ft.
Screen-Perforated Intervals: From ..... ft. to ..... ft., From ..... ft. to ..... ft.
From ..... ft. to ..... ft., From ..... ft. to ..... ft.
Gravel Pack Intervals: From ..... ft. to ..... ft., From ..... ft. to ..... ft.
From ..... ft. to ..... ft., From ..... ft. to ..... ft.

5 GROUT MATERIAL: 1 Neat cement X Cement grout 3 Bentonite 4 Other .....
Grouted Intervals: From 1 ft. to 10 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.
What is the nearest source of possible contamination: 1 Septic tank 2 Sewer lines 3 Lateral lines 4 Cess pool 5 Seepage pit 6 Pit privy 7 Sewage lagoon 8 Feed yard 9 Livestock pens 10 Fuel storage 11 Fertilizer storage 12 Insecticide storage X 13 Watertight sewer lines 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below) .....
Direction from well East How many feet 60 ? Water Well Disinfected? Yes X No .....
Was a chemical/bacteriological sample submitted to Department? Yes ..... No X : If yes, date sample was submitted ..... month ..... day ..... year: Pump Installed? Yes X No .....
If Yes: Pump Manufacturer's name Red Jacket Model No 9bcb HP ½ Volts 230
Depth of Pump Intake 48 ft. Pumps Capacity rated at 13 gal./min.
Type of pump: X Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was X (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on 4 month 13 day 81 year and 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 4 month 23 day 81 year under the business name of Pestinger Pump Service by (signature) X Paul Pestinger

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



ELEVATION:

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
1	27	Dirt			
28	45	Fine Sand			
46	50	Medium Gravel			
50	51	Clay			
51	53	Gravel			

Depth(s) Groundwater Encountered 1. ..... 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.

OFFICE USE ONLY T 14 R 3 E W SEC 23 NE¼ SW¼ NE¼