

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Saline</u>		<u>SW 1/4 SE 1/4 NE 1/4</u>	<u>25</u>	T <u>14</u> S	R <u>3</u> E
Distance and direction from nearest town or city street address of well if located within city? <u>2069 MARC</u>					
2 WATER WELL OWNER: <u>HAROLD MATTISON</u>					
RR#, St. Address, Box #: <u>2069 MARC</u>					
City, State, ZIP Code: <u>SALINA, KS 67401</u>					
Board of Agriculture, Division of Water Resources Application Number: _____					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>49</u> ft. ELEVATION: <u>1230</u>			
		Depth(s) Groundwater Encountered 1. <u>23</u> ft. 2. _____ ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL <u>23</u> ft. below land surface measured on mo/day/yr <u>6-4-91</u>			
		Pump test data: Well water was <u>24</u> ft. after <u>1</u> hours pumping <u>18</u> gpm			
		Est. Yield <u>3.5</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Bore Hole Diameter: <u>8 1/2</u> in. to <u>25</u> ft. and <u>5 1/2</u> in. to <u>49</u> ft.			
WELL WATER TO BE USED AS:					
5 Public water supply    8 Air conditioning    11 Injection well 1 Domestic    3 Feedlot    6 Oil field water supply    9 Dewatering    12 Other (Specify below) 2 Irrigation    4 Industrial    ⑦ Lawn and garden only    10 Monitoring well					
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> If yes, mo/day/yr sample was submitted _____					
Water Well Disinfected? Yes <u>X</u> No _____					
5 TYPE OF BLANK CASING USED:					
1 Steel    3 RMP (SR)    5 Wrought iron    8 Concrete tile    CASING JOINTS: Glued <u>X</u> Clamped _____ ② PVC    4 ABS    6 Asbestos-Cement    9 Other (specify below)    Welded _____ 7 Fiberglass    Threaded _____					
Blank casing diameter <u>5</u> in. to <u>40</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.					
Casing height above land surface <u>22</u> in. weight <u>160 lb.</u> lbs./ft. Wall thickness or gauge No. <u>12 1/4</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel    3 Stainless steel    5 Fiberglass    8 RMP (SR)    10 Asbestos-cement 2 Brass    4 Galvanized steel    6 Concrete tile    9 ABS    11 Other (specify) _____ 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 7 Torch cut    10 Other (specify) _____					
SCREEN-PERFORATED INTERVALS: From <u>40</u> ft. to <u>49</u> ft. From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From <u>23</u> ft. to <u>49</u> ft. From _____ ft. to _____ ft.					
6 GROUT MATERIAL:					
1 Neat cement    2 Cement grout    3 Bentonite    4 Other _____ Grout Intervals: From <u>0</u> ft. to <u>23</u> 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 ③ Watertight sewer lines    6 Seepage pit    9 Feedyard    12 Fertilizer storage    16 Other (specify below) _____ 13 Insecticide storage					
Direction from well? <u>SOUTH + EAST</u> How many feet? <u>24 &amp; 15 ft</u>					
FROM		TO		LITHOLOGIC LOG	
0'		14'		Compacted dirt + silt	
14'		23'		fine sand + light brown clay mixed	
23'		49'		fine to medium sand	
49'				Blue shale	
FROM		TO		PLUGGING INTERVALS	
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) <u>6-4-91</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>523</u> This Water Well Record was completed on (mo/day/yr) <u>6-5-91</u> under the business name of <u>M+D Well Service</u> by (signature) <u>Matthew Loukup</u>					