| | | | | R WELL RECOR | | | | | | | |
|--------------------------|------------------------------------|--|---------------------------------------|--|--|---|--------------------------------------|---|---|----------|--|
| | ON OF WAT | TER WELL: | Fraction | OTT. | | ection Number | | p Number | Range Numbe | | |
| County: | SALINE | | SE 1/4 | | SW 1/4 | 25 | <u>T 1</u> | <u>4 s</u> | R 3 | E(W) | |
| | | | 350 MONTO | ddress of well if k | ocated within city | ? | | | | | |
| 2 WATE | R WELL OW | NER: BILL WO | NDER | | | | | | | | |
| RR#, St. | Address, Bo | x # : 2350 MO | NTCLAIR | | | | Board | of Agriculture, | Division of Water Res | sources | |
| City, State | , ZIP Code | SALINA, | KS. 67401 | | | | Applica | ation Number: | | | |
| LOCAT | E WELL'S L | OCATION WITH 4 | DEPTH OF C | OMPLETED WEL | L 50 d 1 22 | ft. ELEVA | TION: 1 ? | .50 ft 3 | 4-29-89 | ft | |
| τ Γ | 1 | | ELL'S STATIC | WATER LEVEL | 22 | below land sur | face measured | d on mo/day/yr | 4-29- 89 | | |
| I | 1 | 1. | | | | | | | mping25 | | |
| 1 1 | NW | NE E: | | | | | | | mping | | |
| • | i | l l B | ore Hole Diame | eter 8 2 ir | 1. to 45 | | and | in | . to | . gpm | |
| * w h | 1 | | | O BE USED AS: | | | 8 Air condition | | Injection well | | |
| . | ı | i " | 1 Domestic | 3 Feedlot | | | | • | Other (Specify below | w\ | |
| - | SW | SE | 2 Irrigation | 4 Industrial | | | | | · · · · · · · · · · · · · · · · · · · | | |
| | x | | | | | | | | , mo/day/yr sample w | | |
| į L | | | itted | sacionological can | ipio odbililitod to | | | ected? Yes X | | as sub- | |
| 5 TYPE | OF BLANK (| ASING USED: | | 5 Wrought iron | 8 Con | | | | d X Clamped | | |
| 1 St | | 3 RMP (SR) | | 6 Asbestos-Cen | | r (specify below | | | ed | | |
| _2 P\ | | 4 ABS | | 7 Fiberglass | | · · · · · · · · · · · · · · · · · · | • | | ed | | |
| Blank cae | ina diameter | 5 in | to 44 | # Dia | ····· | | # Dia | Trirea | in. to | | |
| Casing he | ing trainerer | and surface 12 | 10 | in., weight | 160 | | ···II., Dia ·· | | SDR 26 | π. | |
| | | R PERFORATION N | | .in., weight | | | | | | | |
| 1 St | | 3 Stainless st | | E Eibardean | _ Z_ F | IMP (SR) | | Asbestos-ceme | | | |
| 2 Br | | | | 5 Fiberglass | 9 A | | | | | | |
| | | 4 Galvanized | | 6 Concrete tile | | | | None used (op | • | | |
| | | RATION OPENINGS | | | Gauzed wrapped | | | | 11 None (open hol | Θ) | |
| | ontinuous slo | | | | Vire wrapped | | 9 Drilled hol | | | | |
| | uvered shutt | • | · h | 4 " | Forch cut | . . | 10 Other (spe | ecity) | | | |
| SCHEEN- | PERFORATI | ED INTERVALS: | From | π. | to | | n | ft. t | 0 | ft. | |
| (| GRAVEL PA | CK INTERVALS: | | | | | | | o | | |
| | | | From | ft. | to | ft., Fror | n | ft. t | 0 | ft. | |
| 6 GROU | T MATERIAL | | | | | | | | | | |
| Grout Inte | rvals: From | n | to | ft., From . | ft. | to | ft., From | 1 <i></i> | ft. to | ft. | |
| | | ource of possible co | ntamination: | | | 10 Livest | ock pens | 14 A | bandoned water well | l | |
| 1 Se | eptic tank | 4 Lateral I | | 7 Pit priv | • | 11 Fuel storage | | | 15 Oil well/Gas well | | |
| 2 Sewer lines 5 Cess poo | | | ool | 8 Sewage lagoon | | 12 Fertili: | 12 Fertilizer storage 16 Other (spec | | | | |
| 3 W | atertight sew | er lines 6 Seepage | e pit | 9 Feedya | rd | 13 Insect | icide storage | | | | |
| Direction 1 | | SOUTH | | | | How mar | y feet? | 20 | | | |
| FROM | TO | | LITHOLOGIC | LOG | FROM | ТО | | PLUGGING I | NTERVALS | | |
| 0 | 3 | TOP SOIL | | | | | | | | - | |
| _3 | 22 | CLAY | | | | | | | | | |
| 22 | 36 | SAND | | | | | | | | | |
| 36 | 37 | CLAY | | | | | 40.72 | | | | |
| _37 | 50 | MED. SAND & | GRAVEL | | | | | | | | |
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| 7 001- | DACTORIO (| OR LANDOWNER'S | CERTIFICATI | ON: This water | all was (1) const | ructed (2) race | netructed or / | 3) plugged upo | ler my jurisdiction an | nd was | |
| | | year)4-29- | | | | | | | Więdge and belief. K | | |
| Completed | On (mo/day/ | year) s License No | 388 | | | | | | -89 | vai 13d3 | |
| | | | | PUMP SERVIC | | | \ \ \ | USH | | ····· | |
| | business na | | | | | by (signat | | 1~~ | sunge | | |
| INSTRU | JCTIONS: Use ty th and Environm | pewriter or ball point pen. ent, Bureau of Water Prot | PLEASE PRESS F ection, Topeka, Kan | IHMLY and PRINT cleans 66620-7320. Telep | rry. Please till in blank hone: 913-296-5514. S | s, underline or circle send one to WATER | the correct answer WELL OWNER at | s. Send top three c nd retain one for yo | opies to Kansas epartmen ur records. | ıı | |