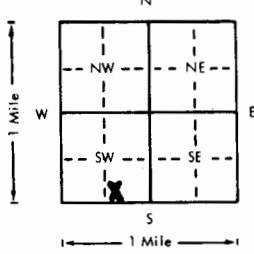


1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number	
County: Saline		SW 1/4 SE 1/4 SW 1/4	25	T 14 S	R 3 E/W	
Distance and direction from nearest town or city?			Street address of well if located within city?			
			2319 Quincy			
2 WATER WELL OWNER: Ray Swisher						
RR#, St. Address, Box # : 2319 Quincy			Board of Agriculture, Division of Water Resources			
City, State, ZIP Code : Salina, Ks. 67401			Application Number:			
3 DEPTH OF COMPLETED WELL 51 ft. Bore Hole Diameter 8 1/2 in. to 51 ft., and . in. to . ft.						
Well Water to be used as:						
1 Domestic 3 Feedlot		5 Public water supply		8 Air conditioning 11 Injection well		
2 Irrigation 4 Industrial		6 Oil field water supply		9 Dewatering 12 Other (Specify below)		
		<input checked="" type="checkbox"/> Lawn and garden only		10 Observation well		
Well's static water level 21 ft. below land surface measured on 4 month 1 day 81 year						
Pump Test Data : Well water was 49 ft. after 1 hours pumping 40 gpm						
Est. Yield 80 gpm: Well water was ft. after hours pumping gpm						
4 TYPE OF BLANK CASING USED:						
1 Steel 3 RMP (SR)		5 Wrought iron		8 Concrete tile		
2 PVC 4 ABS		6 Asbestos-Cement		9 Other (specify below)		
		7 Fiberglass		Casing Joints: Glued <input checked="" type="checkbox"/> Clamped		
				Welded		
				Threaded		
Blank casing dia 5 in. to 51 ft., Dia in. to ft., Dia in. to ft.						
Casing height above land surface 18 in., weight 200 lbs./ft. Wall thickness or gauge No 214						
TYPE OF SCREEN OR PERFORATION MATERIAL:						
1 Steel 3 Stainless steel		5 Fiberglass		7 PVC 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		<input checked="" type="checkbox"/> 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-Perforation Dia 5 in. to 51 ft., Dia in. to ft., Dia in. to ft.						
Screen-Perforated Intervals: From 45 ft. to 51 ft., From ft. to ft., From ft. to ft.						
Gravel Pack Intervals: From ft. to ft., From ft. to ft., From ft. to ft.						
5 GROUT MATERIAL: 1 Neat cement <input checked="" type="checkbox"/> 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 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)		
				<input checked="" type="checkbox"/> Watertight sewer lines		
Direction from well South How many feet 50 ? Water Well Disinfected? Yes <input checked="" type="checkbox"/> No						
Was 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 <input checked="" type="checkbox"/> No						
If Yes: Pump Manufacturer's name Red Jacket Model No. n 9bcb HP 1/2 Volts 230						
Depth of Pump Intake 41 ft. Pumps Capacity rated at 13 gal./min.						
Type of pump: <input checked="" type="checkbox"/> Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other						
6 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 April month 1 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 April month 2 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:		FROM	TO	LITHOLOGIC LOG	FROM TO LITHOLOGIC LOG	
		1	21	Dirt		
		22	35	Fine Sand		
		36	51	Med. Gravel		
ELEVATION:						
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.						