

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number		
County: SALINE		SW 1/4 NE 1/4 NE 1/4	25	T 14 S	R 9 E (W)		
Distance and direction from nearest town or city?			Street address of well if located within city?				
			1815 GLENDALE				
2 WATER WELL OWNER: PREESLEY BUILDERS							
RR#, St. Address, Box #: 104 W. ELM							
City, State, ZIP Code: SALINA KS 67401							
Board of Agriculture, Division of Water Resources Application Number:							
3 DEPTH OF COMPLETED WELL: 50 ft. Bore Hole Diameter: 8 1/2 in. to 50 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)							
X Lawn and garden only 10 Observation well							
Well's static water level: 16 ft. below land surface measured on month 4 day 89 year							
Pump Test Data: Well water was 17 ft. after 1 hours pumping 35 gpm							
Est. Yield 757 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 Casing Joints: Glued X Clamped							
X PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded							
7 Fiberglass Threaded							
Blank casing dia: 5 in. to 45 ft., Dia in. to ft., Dia in. to ft.							
Casing height above land surface: 12 in., weight 460 lbs./ft. Wall thickness or gauge No: SDE 26							
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 X 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 5 ft., Dia in. to ft., Dia in. to ft.							
Screen-Perforated Intervals: From 45 ft. to 50 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: X Neat cement 2 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 X Watertight sewer lines 16 Other (specify below)							
Direction from well: EAST How many feet: 15 ? Water Well Disinfected? Yes No X							
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: 8CC HP: 1 Volts: 280							
Depth of Pump Intake: 40 ft. Pumps Capacity rated at: 20 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 constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was							
completed on month 6 day 4 year 89							
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 month 6 day 4 year 89 under the business							
name of by (signature) Paul J. [Signature]							
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
		1	7	TOP SOIL			
		8	32 04	SANDY LOAM			
		33	34 01	CLAY			
		34	50 14	MED GRAVEL			
ELEVATION:							
Depth(s) Groundwater Encountered 1. 15 ft. 2. 32 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.							

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