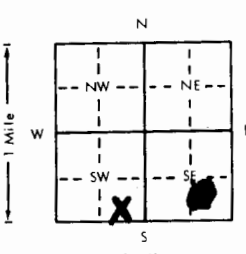


1 LOCATION OF WATER WELL		County: Saline		Section Number 25		Township Number 14 S		Range Number 3 E	
Distance and direction from nearest town or city?				Street address of well if located within city? 2312 Quincy					
2 WATER WELL OWNER: Bob Stenzel									
RR#, St. Address, Box # : 2312 Quincy									
City, State, ZIP Code : Salina, Ks. 67401									
3 DEPTH OF COMPLETED WELL: 53 ft. Bore Hole Diameter: 8 1/2 in. to 53 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)									
☒ Lawn and garden only 10 Observation well									
Well's static water level . . . 21 ft. below land surface measured on . . . 3 month . . . 2 day . . . 81 year									
Pump Test Data : Well water was . . . 50 ft. after . . . 3 hours pumping . . . 15 gpm									
Est. Yield 80 gpm: Well water was . . . ft. after . . . hours pumping . . . gpm									
4 TYPE OF BLANK CASING USED:									
1 Steel ☒ RMP (SR) 5 Wrought iron 8 Concrete tile Casing Joints: Glued ☒ . . . Clamped . . .									
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded . . .									
7 Fiberglass . . . Threaded . . .									
Blank casing dia . . . 5 in. to 48 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 3 Stainless steel 5 Fiberglass ☒ 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 ☒ 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 . . . 48 ft. to . . . 53 ft., From . . . ft. to . . . ft.									
Gravel Pack Intervals: From . . . ft. to . . . ft., From . . . ft. to . . . ft.									
5 GROUT MATERIAL: 1 Neat cement ☒ Cement grout 3 Bentonite 4 Other . . .									
Grouted Intervals: From . . . 1 ft. to 10 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)									
13 Watertight sewer lines									
Direction from well . . . South How many feet 25 ? Water Well Disinfected? Yes ☒ No									
Was a chemical/bacteriological sample submitted to Department? Yes . . . No ☒ If yes, date sample									
was submitted . . . month . . . day . . . year: Pump Installed? Yes ☒ No									
If Yes: Pump Manufacturer's name Webtrol Model No. 102S58B HP 1/2 Volts 230									
Depth of Pump Intake 41 ft. Pumps Capacity rated at . . . gal./min.									
Type of pump: ☒ Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other									
6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ☒ constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was									
completed on . . . March month . . . 2 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 . . . March month . . . 31 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 42 Sand									
43 53 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.									