

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number			
County: SALINE		SE $\frac{1}{4}$ NW $\frac{1}{4}$ NW $\frac{1}{4}$	36	T 14 S	R 3 EW			
Distance and direction from nearest town or city?			Street address of well if located within city?					
			2823 BRET					
2 WATER WELL OWNER: DAN HURICH								
RR#, St. Address, Box # 2823 BRET								
City, State, ZIP Code SALINA, KS 67401								
Board of Agriculture, Division of Water Resources								
Application Number:								
3 DEPTH OF COMPLETED WELL 52' ft. Bore Hole Diameter 8 1/2 in. to . . . 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)								
2 X Lawn and garden only 10 Observation well								
Well's static water level . . . ft. below land surface measured on . . . month . . . day . . . year								
Pump Test Data : Well water was 20 ft. after . . . hours pumping . . . gpm								
Est. Yield 75 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 . . .								
Blank casing dia 4 1/2 in. to 4 7/8 in. Dia . . . in. to . . . ft. Dia . . . in. to . . . ft.								
Casing height above land surface 18 in., weight 160 lbs./ft. Wall thickness or gauge No SDC 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 47 ft. to 52 ft., From . . . ft. to . . . ft.								
Gravel Pack Intervals: From . . . ft. to . . . ft., From . . . ft. to . . . ft.								
5 GROUT MATERIAL:								
1 Neat cement X 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 X Watertight sewer lines 16 Other (specify below)								
Direction from well SOUTH How many feet 30 ? 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 ALL MOTOR Model No. A12-50 HP 1/2 Volts 200								
Depth of Pump Intake 40 ft. Pumps Capacity rated at 10 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 . . . day . . . 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 . . . month . . . day . . . year under the business								
name of PESTINGER PUMP SEE by (signature) Paul S. Pestinger								
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG	
		1	15	TOP SOIL				
		16	21	SANDY LOAM				
		22	29	CLAY				
		30	41	FINE SAND				
		42	52	MED GRAVEL				
ELEVATION:								
Depth(s) Groundwater Encountered 1. 18 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.								

OFFICE USE ONLY

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BWD

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