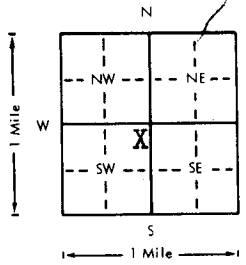


| | | | | | | | |
|---|--|--|--|---|-----------------------------|----|----------------|
| 1 LOCATION OF WATER WELL | | Fraction <u>NE NE SW</u> | Section Number <u>36</u> | Township Number <u>T 14 S</u> | Range Number <u>R 3 E W</u> | | |
| County: <u>Saline</u> | | | | | | | |
| Distance and direction from nearest town or city? | | | Street address of well if located within city? <u>750 Scott</u> | | | | |
| 2 WATER WELL OWNER: <u>David Robb</u> | | | | | | | |
| RR#, St. Address, Box #: <u>750 Scott</u> | | | Board of Agriculture, Division of Water Resources | | | | |
| City, State, ZIP Code: <u>Salina, Ks. 67401</u> | | | Application Number: | | | | |
| 3 DEPTH OF COMPLETED WELL <u>49</u> ft. Bore Hole Diameter <u>48</u> in. to ft., and in. to ft. | | | | | | | |
| Well Water to be used as: | | | | | | | |
| 1 Domestic 3 Feedlot | | 5 Public water supply | | 8 Air conditioning | | | |
| 2 Irrigation 4 Industrial | | 6 Oil field water supply | | 9 Dewatering | | | |
| | | <input checked="" type="checkbox"/> Lawn and garden only | | 10 Observation well | | | |
| Well's static water level <u>20</u> ft. below land surface measured on | | <u>8</u> month <u>3</u> day <u>81</u> year | | | | | |
| Pump Test Data | | Well water was <u>23</u> ft. after <u>4</u> hours pumping | | gpm | | | |
| Est. Yield <u>80-100</u> gpm | | Well water was ft. after hours pumping | | gpm | | | |
| 4 TYPE OF BLANK CASING USED: | | | | | | | |
| 1 Steel | | <input checked="" type="checkbox"/> RMP (SR) | | 5 Wrought iron | | | |
| 2 PVC | | 4 ABS | | 6 Asbestos-Cement | | | |
| | | | | 7 Fiberglass | | | |
| Blank casing dia <u>5</u> in. to <u>44</u> ft., Dia <u>12</u> in. to <u>250</u> lbs./ft. Wall thickness or gauge No <u>sdr26</u> | | | | 8 Concrete tile | | | |
| Casing height above land surface <u>12</u> in., weight <u>250</u> lbs./ft. | | | | 9 Other (specify below) | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | | | | | | |
| 1 Steel | | 3 Stainless steel | | 5 Fiberglass | | | |
| 2 Brass | | 4 Galvanized steel | | 6 Concrete tile | | | |
| | | | | 9 ABS | | | |
| Screen or Perforation Openings Are: | | | | | | | |
| 1 Continuous slot | | 3 Mill slot | | 5 Gauzed wrapped | | | |
| 2 Louvered shutter | | 4 Key punched | | 6 Wire wrapped | | | |
| | | | | 7 Torch cut | | | |
| Screen-Perforation Dia <u>5</u> in. to <u>5</u> ft., Dia <u>44</u> in. to <u>49</u> in. to ft., Dia in. to ft. | | | | 8 Saw cut | | | |
| Screen-Perforated Intervals: From ft. to ft., From ft. to ft., From ft. to ft. | | | | 11 None (open hole) | | | |
| Gravel Pack Intervals: From ft. to ft., From ft. to ft., From ft. to ft. | | | | 9 Drilled holes | | | |
| | | | | 10 Other (specify) | | | |
| 5 GROUT MATERIAL: | | | | | | | |
| 1 Neat cement | | <input checked="" type="checkbox"/> Cement grout | | 3 Bentonite | | | |
| 4 Other | | | | | | | |
| Grouted Intervals: From <u>1</u> ft. to <u>10</u> 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 | | | |
| 2 Sewer lines | | 5 Seepage pit | | 8 Feed yard | | | |
| 3 Lateral lines | | 6 Pit privy | | 9 Livestock pens | | | |
| Direction from well <u>North East</u> | | How many feet <u>40</u> | | Water Well Disinfected? Yes <u>No</u> <input checked="" type="checkbox"/> | | | |
| Was a chemical/bacteriological sample submitted to Department? Yes <u>No</u> <input checked="" type="checkbox"/> If yes, date sample was submitted month day year | | | | | | | |
| If Yes: Pump Manufacturer's name <u>Red Jacket</u> Model No. <u>cn9bc</u> HP <u>1/2</u> Volts <u>230</u> | | | | | | | |
| Depth of Pump Intake <u>40</u> ft. Pumps Capacity rated at <u>13</u> 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 <u>8</u> month <u>3</u> day <u>81</u> year | | | | | | | |
| and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>388</u> | | | | | | | |
| This Water Well Record was completed on <u>8</u> month <u>4</u> day <u>81</u> year under the business name of <u>Pestinger Pump Service</u> by (signature) <u>X Paul Pestinger</u> | | | | | | | |
| 7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: | | FROM | TO | LITHOLOGIC LOG | FROM | TO | LITHOLOGIC LOG |
|  | | 1 | 12 | Dirt | | | |
| | | 13 | 25 | Fine Sand | | | |
| | | 26 | 40 | Clay | | | |
| | | 41 | 49 | Medium 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. | | | | | | | |