

1 LOCATION OF WATER WELL: County: Saline		Fraction NW 1/4 SW 1/4 NE 1/4	Section Number 34	Township Number 14 S	Range Number 3 W E/W
Distance and direction from nearest town or city street address of well if located within city? Centennial and Lucas Road, Salina, Kansas					
2 WATER WELL OWNER: RR#, St. Address, Box # : City, State, ZIP Code :		Salina Airport Authority 3237 Arnold Ave. Salina, Kansas 67401			
		Board of Agriculture, Division of Water Resources Application Number:			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL..... ft. ELEVATION: 1240			
<div style="text-align: center;">N W X E S</div> <div style="font-size: small; margin-top: 10px;">1 Mile</div>		Depth(s) Groundwater Encountered 1. 7.2 ft. 2. ft. 3. ft.			
		WELL'S STATIC WATER LEVEL ft. below land surface measured on mo/day/yr 12/12/94			
		Pump test data: Well water was ft. after hours pumping gpm			
		Est. Yield gpm; Well water was ft. after hours pumping gpm			
		Bore Hole Diameter..... in. to ft., and..... in. to ft.			
		WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well			
		1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)			
		2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well			
		Was a chemical/bacteriological sample submitted to Department? Yes.....No.....X; If yes, mo/day/yr sample was submitted			
		Water Well Disinfected? Yes No X			
5 TYPE OF BLANK CASING USED:		CASING JOINTS: Glued Clamped			
Steel 3 RMP (SR)		Welded			
PVC 4 ABS		Threaded.....X			
Blank casing diameter in. to ft., Dia in. to ft., Dia in. to ft.		Sch. 40			
Casing height above land surface..... in., weight lbs./ft. Wall thickness or gauge No.					
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 PVC 10 Asbestos-cement			
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify)					
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)					
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped 8 Saw cut 11 None (open hole)			
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes					
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)					
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft.					
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft.					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other					
Grout Intervals: From ft. to ft., From ft. to ft., From ft. to ft.					
What is the nearest source of possible contamination:		10 Livestock pens 14 Abandoned water well			
1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well					
2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below) Fertilizer tank					
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage 700					
Direction from well?		How many feet?			
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	4	Clay, Dark brown			MW8
4	6.5	Clay, Medium green			GeoCore # 144191 Above-ground Cover
6.5	12	Clay, Mediium red brown			SAA # Centennial
12	22	Clay, Yellow brown			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 527 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. GeoCore Services, Inc. This Water Well Record was completed on (mo/day/yr) 12/14/94 by (signature) [Signature]					
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, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					