

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: Saline		SE ¼ NW ¼ SW ¼	33	T 14 S	R 3 EW
Distance and direction from nearest town or city street address of well if located within city? 1.25 miles North, .25 Mile East of intersection of Waterwell & Halstead Rd, Salina, Kansas					
2 WATER WELL OWNER:		Salina Airport Authority - Corp of Engineers			
RR#, St. Address, Box # :		3237 Arnold Rd.			
City, State, ZIP Code :		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: 22.8 ft. ELEVATION:				
	Depth(s) Groundwater Encountered 1.....ft. 2.....ft. 3.....ft.				
	WELL'S STATIC WATER LEVEL ft. below land surface measured on mo/day/yr				
	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 .12....in. to23.8....ft., and.....in. to					
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:					
1 Steel 3 RMP (SR) ② PVC 4 ABS Blank casing diameter2.....in. to7.8.....ft., Diain. toft., Diain. toft. Casing height above land surface36.....in., weightlbs./ft. Wall thickness or gauge No. sch. 40					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel 3 Stainless steel 5 Fiberglass ⑦ PVC 10 Asbestos-cement 2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify) 12 None used (open hole)					
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot ③ Mill slot 5 Gauzed wrapped 8 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-PERFORATED INTERVALS: From.....22.8.....ft. to7.8.....ft., Fromft. toft., Fromft. toft.					
GRAVEL PACK INTERVALS: From.....23.8.....ft. to6.1.....ft., Fromft. toft., Fromft. toft.					
GROUT MATERIAL: ① Neat cement 2 Cement grout ③ Bentonite 4 Other					
Grout Intervals: From.....6.1.....ft. to3.....ft., From3.....ft. to0.....ft., Fromft. toft.					
What is the nearest source of possible contamination:					
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage ⑬ Other (specify below) unknown 13 Insecticide storage					
Direction from well? unknown How many feet?					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	Topsoil			
2	4	Clay, brown, tr gravel			
4	10	Clay, silty, yellowish red			
10	16	Clay, brown, silty, black & red mottling			
16	18	Clay, brown, tr gravel			
18	21	Clay, brown, sandy			
21	23	Sand, silty			
23	23.8	Clay, sandy			
Well #SA-SLF-OW112					
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)04-19-94..... and this record is true to the best of my knowledge and belief. Kansas					
Water Well Contractor's License No. 527 This Water Well Record was completed on (mo/day/yr)07-15-94..... by (signature) Doe Alf					
under the business name of GetCore Services, Inc.					

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.