

1) LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Saline</u>		<u>SW</u> $\frac{1}{4}$ <u>NW</u> $\frac{1}{4}$ <u>NE</u> $\frac{1}{4}$	<u>31</u>	T <u>14</u> S	R <u>4</u> E <u>(W)</u>
Distance and direction from nearest town or city street address of well if located within city? <u>2.5 miles West of Bavaria on Magnolia Rd.</u>					
2) WATER WELL OWNER: <u>Keith Bacon</u>					
RR#, St. Address, Box # : <u>8577 W. Magnolia Rd</u>			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : <u>Salina Ks 67401</u>			Application Number:		
3) LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4) DEPTH OF COMPLETED WELL <u>45</u> ft. ELEVATION:			
<div style="text-align: center;">N   --NW--X--NE--   W E   --SW--SE--   S</div>		Depth(s) Groundwater Encountered <u>1</u> ft. 2 ..... ft. 3 ..... ft. WELL'S STATIC WATER LEVEL <u>15</u> ft. below land surface measured on mo/day/yr ..... Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm Est. Yield <u>12</u> gpm: Well water was ..... ft. after ..... hours pumping ..... gpm 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 <u>12 Other (Specify below)</u> 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well <u>Lives stock</u>			
Was a chemical/bacteriological sample submitted to Department? Yes ..... No <input checked="" type="checkbox"/> ; If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes <input checked="" type="checkbox"/> No					
5) TYPE OF BLANK CASING USED:					
1 Steel <u>2 PVC</u>		3 RMP (SR) 4 ABS		5 Wrought iron 6 Asbestos-Cement 7 Fiberglass	
Blank casing diameter <u>5</u> in. to <u>25</u> ft. Dia		8 Concrete tile 9 Other (specify below)		CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped ..... Welded ..... Threaded <input checked="" type="checkbox"/>	
Casing height above land surface <u>24</u> in., weight		lbs./ft. Wall thickness or gauge No. <u>sch 40</u>			
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel 2 Brass		3 Stainless Steel 4 Galvanized Steel		5 Fiberglass 6 Concrete tile <u>7 PVC</u> 8 RMP (SR) 9 ABS	
SCREEN OR PERFORATION OPENINGS ARE:		10 Asbestos-Cement 11 Other (Specify) 12 None used (open hole)		8 Saw cut 9 Drilled holes 10 Other (specify) ..... ft.	
1 Continuous slot 2 Louvered shutter		3 Mill slot 4 Key punched		11 None (open hole)	
SCREEN-PERFORATED INTERVALS: From <u>25</u> ft. to <u>45</u> ft., From ..... ft. to ..... ft.					
GRAVEL PACK INTERVALS: From <u>20</u> ft. to <u>45</u> ft., From ..... ft. to ..... ft.					
6) GROUT MATERIAL: 1 Neat cement 2 Cement grout <u>3 Bentonite</u> 4 Other .....					
Grout Intervals: From <u>0</u> ft. to <u>20</u> ft., From ..... ft. to ..... ft.					
What is the nearest source of possible contamination:					
1 Septic tank 2 Sewer lines 3 Watertight sewer lines		4 Lateral lines 5 Cess pool 6 Seepage pit		7 Pit privy 8 Sewage lagoon 9 Feedyard	
				10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage	
				14 Abandoned water well 15 Oil well/Gas well <u>16 Other (specify below)</u> <u>Pasture</u>	
Direction from well? How many feet?					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	5	Clay - tan			
5	10	Clay - tan, gravelly			
10	20	Clay - tan			
20	31	Clay - tan, brown, trace sand			
31	35	Clay			
35	37	Gravel			
37	44	Clay - reddish brown			
44	45	Shale - gray			
7) CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1)</u> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>12/29/05</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No <u>527</u> This Water Well Record was completed on (mo/day/yr) <u>1/10/05</u> under the business name of <u>Geolore Inc.</u> by (signature) <u>Dan Hall</u>					
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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.					