

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>SALINE</u>		NW 1/4 NE 1/4 NE 1/4	1	T 14 S	R 4 E <u>W</u>
Distance and direction from nearest town or city street address of well if located within city? <u>SOUTHWEST OF INTERSECTION LIGHTVILLE AND STIMMEL RD.</u>					
2 WATER WELL OWNER: <u>MARGIE WYATT</u>					
RR#, St. Address, Box # : <u>% WAYNE JOHNSON</u>					
City, State, ZIP Code : <u>4477 W. STATE SALINA, KS.</u>					
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: <u>130</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft. WELL'S STATIC WATER LEVEL <u>29</u> ft. below land surface measured on <u>mo/day/yr</u> <u>11-20-97</u> 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 <u>5</u> 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; If yes, mo/day/yr sample was sub- mitted Water Well Disinfected? Yes No			
5 TYPE OF BLANK CASING USED:					
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued Clamped					
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded					
7 Fiberglass Threaded					
Blank casing diameter <u>5</u> in. to ft., Dia in. to ft., Dia in. to ft.					
Casing height above land surface in., weight lbs./ft. Wall thickness or gauge No.					
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 12 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 7 Torch cut 9 Drilled holes					
10 Other (specify)					
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft.					
From ft. to ft., From ft. to ft.					
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft.					
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:					
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 16 Other (specify below)					
13 Insecticide storage					
Direction from well? <u>OPEN FIELD NONE APPARENT</u>					
How many feet? <u>OPEN FIELD NONE APPARENT</u>					
FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS					
130 30 CLORATED GRAVEL					
30 06 BENTONITE HOLEPLUG					
06 0 FILL DIRT					
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) <u>11-20-97</u> 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 (mo/day/yr) <u>11-20-97</u>					
under the business name of <u>PESTINGER PUMP SERVICE</u> by (signature) <u>Peay H. Pesting</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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					