WATE	R WEI	LL RECORD	Form W	WC-5	Division	of Wate	er Resources App. N	0.	
1 LOCATION OF WATER WELL: County: Saline		Fraction	1/ SE 1/	Section Number			Range Number R 4 ☐E ☑W		
County: Saline NE ¼ SE ¼ SW ¼ SE ¼ Street/Rural Address of Well Location; if unknown, distance & direction					Global Positioning System (GPS) information:				
from nearest town or intersection: If at owner's address, check here									
3-1/4 miles West of Salina, Ks.					Longitude: 97.71063874 (in decimal degrees)				
5-17- Trines West of Califia, No.						Elevation: 1258			
2 WATER WELL OWNER: St. Francis Community Services						Datum: WGS 84, NAD 83, NAD 27			
RR#, Street Address, Box #: 5097 W. Cloud					Collection Method: GPS unit (Make/Model:)				
City, State, ZIP Code : Salina, Kansas 67401					☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey				
Gairia, Nanoas 07401						Est. Accuracy:			
3 LOCATE WELL 67									
	WITH AN "X" IN 4 DEPTH OF COMPLETED WELL 67.								
SECTION BOX: Depth(s) Groundwater Encountered (1)									
Pump test data: Well water wasft. after hours pumping gpm									
EST. YIELD. 15gpm. Well water was									
W E Bore Hole Diameterin. to ./ft., andin. toft.									
	_		TO BE USED AS:						
sv	v s		☐ Feedlot ☐						
☐ Irrigation ☐ Industrial ☑ Domestic-lawn & garden ☐ Monitoring well									
Was a chemical/bacteriological sample submitted to Department? Yes No If yes, mo/day/yr sample was submitted									
Water well disinfected? Yes No									
5 TYPE OF CASING USED: Steel PVC Other									
CASING JOINTS: Clued Clamped Welded Threaded									
Casing diameter									
Casing height above land surface									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
☐ Steel ☐ Stainless Steel ☑ PVC ☐ Other (Specify) ☐ Brass ☐ Galvanized Steel ☐ None used (open hole)									
☐ Brass ☐ Galvanized Steel ☐ None used (open hole) SCREEN OR PERFORATION OPENINGS ARE:									
☐ Continuous slot									
Louvered shutter Key punched Wire wrapped Saw cut Other (specify)									
SCREEN-PERFORATED INTERVALS: From									
From									
GRAVEL PACK INTERVALS: From									
From ft. to ft., From ft. to ft.									
Grout Intervals: From									
What is the nearest source of possible contamination:									
Septic tank Lateral lines Pit privy Livestock pens Insecticide storage Other (specify below)									
	Sewer lin			Fuel storage			d water well		
	Watertig	ht sewer lines	it ∐ Feedyard [nile	Fertilizer st		il well/ga	as well		
FROM	TO	LITHOLOG		FROM				GGING INTERVALS	
0	1	Topsoil	ic Loc	INOM	10 11		OG (cont.) Of The	COLINO INTERVILLO	
1	27	Clay, gray/tan				······			
27	35	Sand, fine							
35	38	Creek gravel							
38	61	Clay, green/clay							
61	68	Creek gravel							
68	71	Shale, gray							
TONETH ACTORIS OF LANDOWNERS CERTIFICATION, The state of									
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was \(\big \) constructed, \(\big \) reconstructed, or \(\big \) plugged under my jurisdiction and was completed on \(\text{mov} \) day/year \(\dots \dot									
under my jurisdiction and was completed on (mo/day/year)									
under the business name of Peterson McNett Drilling, Inc. by (signature)									
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send one copy to									
Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367.									
1 elepho	Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at								