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|--|--|---|-----------------------------|-----------------------------|---|
| 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>NW</u> $\frac{1}{4}$ | <u>9</u> | <u>T</u> <u>15</u> <u>S</u> | <u>R</u> <u>2</u> <u>E/W</u> |
| Distance and direction from nearest town or city street address of well if located within city? <u>3785 HOLMES RD.</u> | | | | | |
| 2 WATER WELL OWNER: <u>RICHARD BURNS</u> RR#, St. Address, Box # : <u>3785 HOLMES RD.</u> City, State, ZIP Code : <u>SALINA, KS. 67401</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>32</u> ft. ELEVATION: _____ | | | |
| <div style="text-align: center;"><p>1 Mile</p></div> | | Depth(s) Groundwater Encountered 1. <u>17</u> ft. 2. _____ ft. 3. _____ ft. | | | |
| | | WELL'S STATIC WATER LEVEL <u>17</u> ft. below land surface measured on mo/day/yr <u>8-28-91</u> | | | |
| | | Pump test data: Well water was <u>28</u> ft. after <u>1</u> hours pumping <u>6</u> gpm | | | |
| | | Est. Yield <u>6</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm | | | |
| | | Bore Hole Diameter <u>9</u> in. to <u>32</u> 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 <u>X</u> _____; If yes, mo/day/yr sample was submitted _____ Water Well Disinfected? Yes <u>X</u> No _____ | | | | | |
| 5 TYPE OF BLANK CASING USED: | | | | | |
| 1 Steel | | 3 RMP (SR) | 5 Wrought iron | 8 Concrete tile | CASING JOINTS: Glued <u>X</u> Clamped _____ |
| 2 PVC | | 4 ABS | 6 Asbestos-Cement | 9 Other (specify below) | Welded _____ |
| | | | 7 Fiberglass | | Threaded _____ |
| Blank casing diameter <u>5</u> in. to <u>22</u> ft., Dia. <u>160</u> in. to _____ ft., Dia. _____ in. to _____ ft. | | | | | |
| Casing height above land surface _____ in., weight _____ lbs./ft. Wall thickness or gauge No. <u>SDR 26</u> | | | | | |
| 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 | 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 | |
| 10 Other (specify) _____ | | | | | |
| SCREEN-PERFORATED INTERVALS: | | | | | |
| From _____ ft. to _____ ft. | | 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. | From _____ ft. to _____ ft. |
| 6 GROUT MATERIAL: | | | | | |
| 1 Neat cement | | 2 Cement grout | 3 Bentonite | 4 Other _____ | |
| Grout Intervals: From <u>0</u> ft. to <u>20</u> 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>EAST</u> How many feet? <u>50</u> | | | | | |
| FROM | | TO | LITHOLOGIC LOG | | FROM TO PLUGGING INTERVALS |
| 0 | | 1 | TOP SOIL | | |
| 1 | | 12 | SANDSTONE RED | | |
| 12 | | 32 | SANDSTONE TAN | | |
| 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>8-28-91</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>8-28-91</u> under the business name of <u>PESTINGER PUMP SERVICE</u> by (signature) <u>Paul Pestinger</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 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records. | | | | | |

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