|   |                 |                             | 1           |             | L HECORD          | Form vv          |                            |                    |                          | -6                                      | Don          | aa Alum   | <b>.</b>  |
|---|-----------------|-----------------------------|-------------|-------------|-------------------|------------------|----------------------------|--------------------|--------------------------|---|--------------|-----------|-----------|
| I LOCATION OF WATER WELL:  County: SALINE |                 |                             | Fraction    |             | SW 1/4            | ML               | Section Number             | 1                  | nship Nun<br>15          |   | Range Number |           |           |
| County:                                   |                 |                             | NM          | / <b>-</b>  |                   | NW 1/4           | 9                          | T                  |                          | s                                       | R            | -         | E/W       |
| Distance a                                | and direction   | from nearest town of        |             |             |                   | ated within      | city?                      |                    |                          |   |              |           |           |
|   |                 |                             | 361 S.      | HOLMES      | RD.               |                  |                            |                    |                          |   |              |           |           |
| WATE                                      | R WELL OW       | NERKEVIN TUR                | ENER        |             |                   |                  |                            |                    |                          |   |              |           |           |
| RR#, St.                                  | Address, Box    | ×#:3861 S. H                | OLMES       | RD.         |                   |                  |                            | Во                 | ard of Ag                | riculture, [                            | Division of  | Water f   | Resources |
|   | , ZIP Code      | SALINA. K                   |             |             |                   |                  |                            | Ар                 | plication I              | Number:                                 |              |           |           |
|   |                 | OCATION WITH 4              |             |             | ETED WELL         | 32               | ft FLEVA                   | TION               |                          |   |              |           |           |
| AN "X"                                    | IN SECTIO       |                             |             |             |                   | -                |                            |                    |                          |   |              |           |           |
| - r                                       | <del></del>     | ·                           |             |             |                   | -                | ft. below land sur         |                    |                          |   |              |           |           |
| 1   | i               |                             |             |             |                   |                  |                            |                    |                          |   |              |           |           |
|   | NW              | NE                          |             |             |                   |                  | <b>30</b> ft. a            |                    |                          |   |              |           |           |
|   | × I             | ,   Es                      | st. Yield . | <b>b</b>    | gpm: Well w       | ater was .       | ft. a                      | ıfter              |                          | hours pu                                | mping        | <i></i> . | gpm       |
| ≝ w ŀ                                     |                 | l Bo                        | ore Hole D  | iameter     | <b>9</b> in.      | to 3             | <b>2</b>                   | and                |                          | in.                                     | to           |           | ft.       |
|   |                 |                             |             |             | USED AS:          |                  |                            | 8 Air cond         |                          |   | Injection v  |           |           |
| 7   | 1               |                             | 1 Dome      | stic        | 3 Feedlot         | 6 Oil fie        |                            | 9 Dewate           | •                        |   | Other (Sp    |           | low)      |
|   | sw              | SE                          | 2 Irrigat   | ion         | 4 Industrial      |                  | and garden only            |                    | -                        |   |              |           |           |
|   | - !             | l l w                       | •           |             |                   |                  | to Department? Ye          |                    |                          |   |              |           |           |
| į L                                       |                 |                             | itted       | ica/ bacter | ological samp     | ie subiliille    |                            |                    |                          |   | v            | -         | was sub   |
| 7/05                                      | 35.51.41.11     |                             | ittea       | 5 144       |                   |                  |                            | ter Well D         |                          |   |              | No        |           |
|   |                 | CASING USED:                |             |             | rought iron       |                  | Concrete tile              |                    | ING JOIN                 |   | iX           |           |           |
| 1 St                                      |                 | 3 RMP (SR)                  |             |             | bestos-Ceme       | nt 9 C           | Other (specify below       | <b>v</b> )         |                          | Weld                                    | ed           |           |           |
| 2 P                                       |                 | 4 ABS                       |             |             | oerglass          |                  |                            |                    |                          |   | ided         |           |           |
| Blank cas                                 | ing diameter    | 5in.                        | to 22       |             | ft., Dia          |                  | in. to                     | ft., Dia           | a                        | i                                       | in. to       |           | ft.       |
| Casing he                                 | ight above la   | and surface1                | 18          | in., w      | eight             | 160              | lbs./                      | ft. Wall this      | ckness or                | gauge No                                | o            | DR 26     |           |
|   |                 | R PERFORATION M             |             |             |                   |                  | 7 PVC                      |                    |                          | stos-ceme                               |              |           |           |
| 1 St                                      | eel             | 3 Stainless st              | eel         | 5 Fit       | perglass          |                  | 8 RMP (SR)                 |                    | 11 Other                 | (specify)                               |              |           |           |
| 2 Br                                      |                 | 4 Galvanized                |             |             | ncrete tile       |                  | 9 ABS                      |                    |                          | used (op                                |              |           |           |
|   |                 | RATION OPENINGS             |             | 0 00        |                   | uzed wrapp       |                            | 8 Saw o            |                          | ` '                                     | ,            | (         | h =1=\    |
|   |                 |                             |             | 35          |                   |                  |                            |                    |                          |   | 11 None      | (open i   | noie)     |
|   | ontinuous slo   |                             |             |             |                   | re wrapped       |                            | 9 Drilled          |                          |   |              |           |           |
|   | uvered shutt    | , ,                         | •           | 22          | 7 10              | rch cut 3        | 2<br>                      | 10 Other           | (specify)                |   |              |           |           |
| SCREEN-                                   | PERFORATE       | ED INTERVALS:               | From        |             | ft. to            | ب                |                            | m                  |                          | ft. to                                  | o <i>.</i>   |           | ft.       |
|   |                 |                             | From        |             | ft. to            | · <u>.</u>       | ft., Fror                  | m                  |                          | ft. to                                  | <b>)</b>     |           | ft.       |
| (   | GRAVEL PA       | CK INTERVALS:               | From        | 17          | , ft. to          | <b>3</b>         | 2 ft., Fror                | m                  |                          | ft. to                                  | o <i>.</i>   |           | ft.       |
|   |                 |                             | From        |             | ft. to            |                  | ft., Fror                  | m                  |                          | ft. to                                  |              |           | ft.       |
| GROU                                      | T MATERIAL      | : 1 Neat cem                | nent        | 2 Cen       | nent grout        | 3                | Bentonite 4                | Other              |                          |   |              |           |           |
| Grout Inte                                | rvals: From     | m <b>Q</b> ft.              | to          | .17 f       | t., From          |                  | ft. to                     | ft., F             | rom                      | <b>.</b>                                | . ft. to .   |           |           |
| What is th                                |                 | ource of possible con       |             |             |                   |                  |                            | tock pens          |                          |   | andoned      |           |           |
|   | eptic tank      | 4 Lateral li                |             |             | 7 Pit privy       |                  | 11 Fuel s                  | •                  |                          |   | l well/Gas   |           |           |
| 2 Sewer lines 5 Cess poo                  |                 |                             |             |             |                   |                  | 12 Fertili                 | <b>a</b>           | 16 Other (specify below) |   |              |           |           |
|   |                 | er lines 6 Seepage          | • •         |             |                   |                  |                            | E PLUGGED BY OWNER |                          |   |              |           |           |
|   | •               | . •                         | •           |             | 9 Feedyalu        |                  |                            |                    | _                        |   |              | I. OWN.   | PA        |
|   | from well?      | SOUTHEAST                   |             | 210100      |                   |                  | How mar                    | ny feet?           | 1                        | CCINC IN                                | NTERVAL      |           |           |
| FROM                                      | TO              |                             | LITHOLOG    | SIC LUG     |                   | FRO              | M TO                       |                    |                          | GGING II                                | VIERVAL      | 3         |           |
| 0   | 2               | TOP SOIL                    |             |             |                   |                  |                            |                    |                          |   |              |           |           |
| 2   | 16              | SANDSTONE                   | •           |             |                   |                  |                            |                    |                          |   |              | -         |           |
| 16  | 32              | CLAT GRAY                   | w/LAYE      | RS SAN      | DSTONE T          | AN               |                            |                    |                          |   |              |           |           |
|   |                 | SHALE                       |             |             |                   |                  |                            |                    |                          |   |              |           |           |
|   |                 |                             |             |             |                   |                  |                            |                    |                          |   |              |           |           |
|   |                 |                             |             |             |                   |                  |                            |                    |                          |   |              |           |           |
|   |                 |                             |             |             |                   |                  |                            |                    |                          |   |              |           |           |
|   |                 |                             |             |             |                   |                  |                            |                    |                          |   |              |           |           |
|   |                 |                             |             |             |                   |                  |                            |                    |                          |   |              |           |           |
|   |                 |                             |             |             |                   |                  |                            |                    |                          |   |              |           |           |
|   | ļ               |                             |             |             |                   |                  |                            |                    |                          |   |              |           |           |
|   |                 |                             |             |             |                   |                  |                            |                    |                          |   |              |           |           |
|   |                 |                             |             |             |                   |                  |                            |                    |                          |   |              |           |           |
|   |                 |                             |             |             |                   |                  |                            |                    |                          |   |              |           |           |
|   |                 |                             |             |             |                   |                  |                            |                    |                          |   |              |           |           |
|   |                 |                             |             |             |                   |                  |                            |                    |                          |   |              |           |           |
|   | 1               | D I ANDOMOTOS               | CEDTICIO    | ATION: T    | bio water"        | woo /1\ c=       | potruoted (0)              | notrusta d         | or (2) -l                | nand /si                                | 2 my 1       | edictio-  | and was   |
| _   |                 | OR LANDOWNER'S              |             |             |                   |                  |                            |                    |                          |   |              |           |           |
| completed                                 | on (mo/day/     | year) <del>/1 -</del> 2     | 320         |             |                   |                  | and this recor             | ra is true) to     | the best                 | COLUZA KNO                              | wiege al     | iu belief | i. Nansas |
|   |                 | s License No                |             |             |                   | Well Reco        |                            |                    | /yr) .//                 | Will                                    | 1            | *****     |           |
|   |                 | ne of PESTINGER             |             |             |                   |                  | by (signat                 |                    | ref/                     | ~ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | any          | 18        |           |
| INSTRU                                    | ICTIONS: Use ty | pewriter or ball point pen. | PLEASE PRE  | SS FIRMLY a | nd PRINT clearly. | Please fill in b | lanks, underline or circle | the correct a      | nswers. Sen              | d top three                             | copies to ar | nsas Depa | rtment    |
| of Heal                                   | th and Environm | ent, Bureau of Water, Top   | eka, Kansas | 66620-0001. | relephone: 913-29 | 96-5545. Send    | one to WATER WELL OV       | WNEH and ret       | ain one for              | your records.                           |              |           |           |