

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: <u>SALINE</u>		NW ¼ NW ¼ SE ¼		26		T 15 S		R 3W EW	
Distance and direction from nearest town or city street address of well if located within city? <u>430 W. PARSONS RD.</u>									
2 WATER WELL OWNER: <u>KEN DICKERMAN</u>									
RR#, St. Address, Box # : <u>430 W, PARSONS RD.</u>						Board of Agriculture, Division of Water Resources			
City, State, ZIP Code : <u>ASSARIA, KS. 67416</u>						Application Number:			
3 LOCATE WELL'S LOCATION WITH		4 DEPTH OF COMPLETED WELL: <u>75</u> ft. ELEVATION:							
AN "X" IN SECTION BOX:		Depth(s) Groundwater Encountered 1. <u>36</u> ft. 2. <u>36</u> ft. 3. <u>36</u> ft. WELL'S STATIC WATER LEVEL <u>36</u> ft. below land surface measured on mo/day/yr <u>1-7-02</u> Pump test data: Well water was <u>70</u> ft. after <u>1</u> hours pumping <u>10</u> gpm Est. Yield <u>10 to 11</u> gpm: Well water was <u>70</u> ft. after <u>1</u> hours pumping <u>10</u> gpm Bore Hole Diameter <u>9</u> in. to <u>7.5</u> ft., and <u>7.5</u> in. to <u>7.5</u> 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 Domestic (lawn & garden) 10 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes. <u>X</u> No. <u>X</u> ; If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes <u>X</u> No <u>X</u>							
5 TYPE OF BLANK CASING USED:									
1 Steel		3 RMP (SR)		6 Asbestos-Cement		9 Other (specify below)		CASING JOINTS: Glued. <u>X</u> Clamped. <u>X</u>	
2 PVC		4 ABS		7 Fiberglass				Welded <u>X</u>	
Blank casing diameter <u>5</u> in. to <u>6.5</u> ft., Dia <u>6.5</u> in. to <u>6.5</u> ft., Dia <u>6.5</u> in. to <u>6.5</u> ft.									
Casing height above land surface <u>24</u> in., weight <u>160</u> 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) <u>OPEN FIELD NONE APPARENT</u>	
SCREEN OR PERFORATION OPENINGS ARE:		3 Mill slot <u>.025</u>		5 Gauzed wrapped		8 Saw cut		11 None (open hole)	
1 Continuous slot		4 Key punched		6 Wire wrapped		9 Drilled holes			
2 Louvered shutter				7 Torch cut		10 Other (specify) <u>OPEN FIELD NONE APPARENT</u>			
SCREEN-PERFORATED INTERVALS: From <u>63</u> ft. to <u>75</u> ft., From <u>63</u> ft. to <u>75</u> ft., From <u>63</u> ft. to <u>75</u> ft.									
GRAVEL PACK INTERVALS: From <u>26</u> ft. to <u>75</u> ft., From <u>26</u> ft. to <u>75</u> ft., From <u>26</u> ft. to <u>75</u> ft.									
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other									
Grout Intervals: From <u>0</u> ft. to <u>27</u> ft., From <u>27</u> ft. to <u>27</u> ft., From <u>27</u> ft. to <u>27</u> 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?									
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS				
0	2	TOP SOIL							
2	6	SANDY LOAM BROWN							
6	38	CLAY BROWN							
38	42	GRAVEL BROWN							
42	60	CLAY BROWN							
60	72	GRAVEL BROWN							
72	75	SHALE LIGHT GREEN							
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>1-7-02</u> and this record is true to the best of my knowledge and belief. Kansas									
Water Well Contractor's Licence No. <u>388</u> This Water Well Record was completed on (mo/day/yr) <u>1-12-02</u>									
under the business name of <u>PESTINGER PUMP SERVICE</u> by (signature) <u>[Signature]</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 785-296-5524. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.									