

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number																																																																			
County: <b>Saline</b>		<b>NW ¼ NW ¼ SW ¼</b>		<b>7</b>		<b>T 15 S</b>		<b>R 3 E/W</b>																																																																			
Distance and direction from nearest town or city street address of well if located within city? <b>Salina Solid Waste Municipal Landfill</b>																																																																											
2 WATER WELL OWNER: <b>City of Salina</b>																																																																											
RR#, St. Address, Box # : <b>300 W. Ash</b>					Board of Agriculture, Division of Water Resources																																																																						
City, State, ZIP Code : <b>Salina, Kansas 67401</b>					Application Number:																																																																						
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:			4 DEPTH OF COMPLETED WELL: <b>30</b> ft. ELEVATION: <b>0</b>																																																																								
			Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft.																																																																								
			WELL'S STATIC WATER LEVEL <b>23</b> ft. below land surface measured on mo/day/yr <b>1/14/2004</b>																																																																								
			~ Pump test data: Well water was <b>NA</b> ft. after .... hours pumping .... gpm																																																																								
			Est. Yield <b>NA</b> gpm: Well water was .... ft. after .... hours pumping .... gpm																																																																								
			Bore Hole Diameter <b>12</b> in. to <b>30</b> 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)																																																																											
<b>Gas probe</b>																																																																											
Was a chemical/bacteriological sample submitted to Department? Yes.....No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted																																																																											
Water Well Disinfected? Yes No <input checked="" type="checkbox"/>																																																																											
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 .....																																																																											
Blank casing diameter <b>2</b> in. to <b>2</b> ft. Dia. .... in. to .... ft. Dia. .... in. to .... ft.																																																																											
Casing height above land surface <b>34.2</b> in. weight .... lbs./ft. Wall thickness or gauge No. <b>Sch. 40</b>																																																																											
TYPE OF SCREEN OR PERFORATION MATERIAL																																																																											
1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement																																																																											
2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify) .....																																																																											
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																																																																											
7 Torch cut 10 Other (specify) .....																																																																											
SCREEN-PERFORATED INTERVALS: From <b>2</b> ft. to <b>30</b> ft. From .... ft. to .... ft.																																																																											
GRAVEL PACK INTERVALS: From <b>2</b> ft. to <b>30</b> ft. From .... ft. to .... ft.																																																																											
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other .....																																																																											
Grout Intervals: From <b>0</b> ft. to <b>2</b> 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)																																																																											
<b>Landfill</b>																																																																											
Direction from well? <b>Northwest</b> How many feet? <b>800</b>																																																																											
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>LITHOLOGIC LOG</th> <th>FROM</th> <th>TO</th> <th>PLUGGING INTERVALS</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>2</td> <td>Clay, very silty, organic,</td> <td></td> <td></td> <td></td> </tr> <tr> <td>2</td> <td>6</td> <td>Clay, silty, stiff, dry, Brown</td> <td></td> <td></td> <td></td> </tr> <tr> <td>6</td> <td>7</td> <td>Clay, silty, dry, stiff, Brown with orange stain</td> <td></td> <td></td> <td></td> </tr> <tr> <td>7</td> <td>8</td> <td>Clay, silty, dry, stiff, Orange with black stain</td> <td></td> <td></td> <td></td> </tr> <tr> <td>8</td> <td>10.5</td> <td>Clay, silty, dry, stiff, Orangish Brown and Gr</td> <td></td> <td></td> <td></td> </tr> <tr> <td>10.5</td> <td>13</td> <td>Clay, silty, stiff, dry, Brown and Gray</td> <td></td> <td></td> <td></td> </tr> <tr> <td>13</td> <td>15.5</td> <td>Clay, silty, dry, stiff, Gray and Brown</td> <td></td> <td></td> <td></td> </tr> <tr> <td>15.5</td> <td>16.5</td> <td>Silt, dry, Tan</td> <td></td> <td></td> <td></td> </tr> <tr> <td>16.5</td> <td>25.5</td> <td>Clay, silty, trace moisture, stiff, Brown</td> <td></td> <td></td> <td></td> </tr> <tr> <td>25.5</td> <td>33</td> <td>Clay, silty, slightly moist, very firm, Brown</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>										FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	0	2	Clay, very silty, organic,				2	6	Clay, silty, stiff, dry, Brown				6	7	Clay, silty, dry, stiff, Brown with orange stain				7	8	Clay, silty, dry, stiff, Orange with black stain				8	10.5	Clay, silty, dry, stiff, Orangish Brown and Gr				10.5	13	Clay, silty, stiff, dry, Brown and Gray				13	15.5	Clay, silty, dry, stiff, Gray and Brown				15.5	16.5	Silt, dry, Tan				16.5	25.5	Clay, silty, trace moisture, stiff, Brown				25.5	33	Clay, silty, slightly moist, very firm, Brown			
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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) <b>1/14/2004</b> and this record is true to the best of my knowledge and belief.																																																																											
Kansas Water Well Contractor's License No <b>527</b> This Water Well Record was completed on (mo/day/yr) <b>1/21/2004</b>																																																																											
under the business name of <b>GeoCore Inc.</b> by (signature) <i>[Signature]</i>																																																																											
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.																																																																											

OFFICE USE ONLY

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