

1 LOCATION OF WATER WELL:		Fraction		Section Number	Township Number	Range Number
County: <b>Saline</b>		NW ¼ NW ¼ SW ¼		<b>19</b>	T <b>15</b> S	R <b>3</b> <b>EW</b>
Distance and direction from nearest town or city street address of well if located within city? <b>1 mi. SW of Smolan, Kansas</b>						
2 WATER WELL OWNER: <b>Morrison Ventures</b>						
RR#, St. Address, Box # : <b>1700 E. Iron</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>60</b> ft. ELEVATION: <b>1290</b>				
		Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft.				
		WELL'S STATIC WATER LEVEL: ~ <b>16.5</b> ft. below land surface measured on mo/day/yr <b>10/1/2009</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>10</b> in. to <b>60</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)				
		2 Irrigation 4 Industrial 7 Lawn and garden only <b>10</b> Monitoring well				
		Was a chemical/bacteriological sample submitted to Department? Yes.....No <b>✓</b> ; If yes, mo/day/yr sample was submitted				
		Water Well Disinfectant? Yes No <b>✓</b>				
5 TYPE OF BLANK CASING USED:						
1 Steel		3 RMP (SR)		5 Wrought iron		8 Concrete tile
<b>2</b> PVC		4 ABS		6 Asbestos-Cement		9 Other (specify below)
				7 Fiberglass		
Blank casing diameter <b>5</b> in. to <b>40</b> ft. Dia. .... in. to .... ft. Dia. .... in. to .... ft.		Casing joints: Glued .... Clamped ....				
Casing height above land surface <b>30</b> in., weight .... lbs./ft. Wall thickness or gauge No. <b>Sch. 40</b>		Welded ....				
TYPE OF SCREEN OR PERFORATION MATERIAL		Threaded. <b>✓</b>				
1 Steel		3 Stainless steel		<b>7</b> PVC		10 Asbestos-cement
2 Brass		4 Galvanized steel		8 RMP (SR)		11 Other (specify) ....
				9 ABS		12 None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped				
1 Continuous slot		<b>3</b> Mill slot		6 Wire wrapped		8 Saw cut
2 Louvered shutter		4 Key punched		7 Torch cut		11 None (open hole)
SCREEN-PERFORATED INTERVALS: From <b>40</b> ft. to <b>60</b> ft. From .... ft. to .... ft. From .... ft. to .... ft.		9 Drilled holes				
GRAVEL PACK INTERVALS: From <b>20</b> ft. to <b>60</b> ft. From .... ft. to .... ft. From .... ft. to .... ft.		10 Other (specify) ....				
		11 None (open hole)				
6 GROUT MATERIAL:						
1 Neat cement		2 Cement grout		<b>3</b> Bentonite		4 Other ....
Grout intervals: From <b>2</b> ft. to <b>20</b> 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
2 Sewer lines		5 Cess pool		8 Sewage lagoon		11 Fuel storage
3 Watertight sewer lines		6 Seepage pit		9 Feedyard		12 Fertilizer storage
						13 Insecticide storage
Direction from well?						14 Abandoned water well
						15 Oil well/Gas well
						16 Other (specify below) ....
						How many feet?
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	
0	6	Clay, stiff, Dark Brown				
6	11	Clay, sl. stiff, Red Brown				
11	15	Clay, silty, tr. sand, Yellow Brown				
15	22	Clay, silty, Lt. Red Brown				
22	25	Clay, v. silty, Yellow Brown				
25	29	Sand, m-c, w/f gravel (Dakota), V. Dark Brow				
29	31	Clay, sand, Yellow Brown				
31	32	Sand, m-c, w/f gravel, Brown to V. Dark Brow				
32	36	Clay, silty, Yellow Brown				
36	39	Sand, m-c, w/f gravel (Dakota clasts), Brown				
39	45.5	Clay, silty, Yellow Brown				
45.5	51	Clay, plastic, w/tr. sand gravel, Yellow Brown				
51	51.5	Sand, m-c, w/f gravel, Brown			RW, Abovegrade	
51.5	59.5	Clay, Yellow Brown				
59.5	60	Shale, v. weathered, Red				
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <b>(1)</b> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <b>9/17/2009</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>10/8/2009</b>				
under the business name of <b>GeoCore, Inc.</b>		by (signature) <i>Paul Bell</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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