		WATE	R WELL RECORD	Form WWC	-5 KSA 82	a-1212		
1 LOCATION OF WAT	TER WELL:	Fraction		S	ection Number		ip Number	Range Number
County: Sa1		SW 1/4	SW 14 SE	1/4	7	<u> </u>	.5 s	$R 3 \in \mathbb{N}$
Distance and direction			dress of well if locate	d within city	?			
	Salina Land							
2 WATER WELL OW	NER: City o	f Salina						
RR#, St. Address, Box	* # : 300 W.	Ash				Board	of Agriculture,	Division of Water Resource
City, State, ZIP Code		, Kansas					ation Number:	
LOCATE WELL'S LO	I BUX.							
				_				
† i	i "-							mping gpm
NW	NE Fet							mping gpm
<u> </u>								. to
* w				5 Public wa		8 Air condition		Injection well
-	"-	1 Domestic					•	Other (Specify below)
SW:	SE	2 Irrigation						Cities (Specify below)
	V Was	-			-	_		mo/day/yr sample was sub
<u> </u>	mitte		· ·		•	ter Weil Disinf		No X
5 TYPE OF BLANK C			5 Wrought iron	8 Coor	rete tile			1 Clamped
1 Steel	3 RMP (SR)	•	6 Asbestos-Cement		r (specify below			ed
(2)PVC	4 ABS		7 Fiberglass			•		adedX
Blank casing diameter		5	# Dia	· · · · · ·	· • • • • • • • • • • • • • • • • • • •		111192	in. to ft.
Casing height above las	nd sudace	30	in weight			(h. Mail thialana		sch, 40
TYPE OF SCREEN OF			n., weight	(7)P	iDS./ VC			
1 Steel	3 Stainless stee	•	•	_			Asbestos-ceme	
2 Brass	4 Galvanized st		5 Fiberglass	9 A	MP (SR)			
SCREEN OR PERFOR			6 Concrete tile				None used (op-	•
1 Continuous slot				d wrapped vrapped		8 Saw cut 9 Drilled hol		11 None (open hole)
2 Louvered shutte	•		7 Torch	• •				• • • • • • • • • • • • • • • • • • • •
SCREEN-PERFORATE	U INCLEDIAL S. E	inciaeu	7 10rai	сы 20	4 5	10 Other (spe	ecziy))
3CHEE!4-FERFORATE)
GRAVEL PAC		rom.	4 * **	20	* From	···	به ۱۹۰۰)
CHAPLETAG		rom	ft. to	• • • • • • •	ft., Fror			
GROUT MATERIAL:			Cement grout	(3)Bent				
								. ft. to ft.
What is the nearest sou			,			lock pens		andoned water well
1 Septic tank	4 Lateral line		7 Pit privy		11 Fuel s	•		well/Gas well
2 Sewer lines	5 Cess pool		8 Sewage lago	on		zer storage	_	her (specify below)
3 Watertight sewe	r lines 6 Seepage p	• •			13 Insecticide storage			andfill
Direction from well?	North				How man	•	1500	
FROM TO	Lſ	THOLOGIC L	OG	FROM	TO		PLUGGING IN	ITERVALS
0 6	Snd w/ clay					-		
6 8	Cly w/ snd.	brn, pls	tc					
8 20	Snd $w/$ cly,	yell brn	stringers of					
	gray to blk							
				,				
								٠.
								·:
				T		MW 1	6 - Above	ground
	•							
CONTRACTOR'S OF	R LANDOWNER'S CO	ERTIFICATION	d. This water well was	(1) constr	icted (2) rema	structed or /2) plugged upda	r my jurisdiction and was
completed on (mo/day/ye			. This water well was	- wilsut				wiedge and belief. Kansas
Water Well Contractor's	License No 52	27	This Water Wei	l Record w				
under the business name	GenCore S	Services, In	iins vaatei vyei C.	, HECOIG W	by (signatu	<i>- - - - - - - - - -</i>	2 610	
	G ()1		MLY and PRINT clearly. Pleas	e fill in hisaks			Send top three c	ogies to Karsas Department
of Health and Environmen	nt, Bureau of Water, Topeka	a, Kansas 66620-0	001, Telephone: 913-296-554	is. Send one to	WATER WELL OW	NER and retain on	e for your records.	