

1 LOCATION OF WATER WELL: County: <u>SALINE</u>	Fraction <u>NN</u> $\frac{1}{4}$ <u>NW</u> $\frac{1}{4}$ <u>NE</u> $\frac{1}{4}$	Section Number <u>30</u>	Township Number T <u>15</u> S	Range Number R <u>3</u> ☒ W
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2 WATER WELL OWNER: MILDRED LARSON
RR#, St. Address, Box # : 815 MANAR Rd.
City, State, ZIP Code : SALINA KS. 67401-5134

4. DEPTH OF COMPLETED WELL. 15 ft. ELEVATION: _____

Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.

WELL'S STATIC WATER LEVEL Nonexistent? _____ ft. below land surface measured on mo/day/yr 12-28-94

Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm

Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

Bore Hole Diameter. _____ in. to _____ 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	10 Monitoring well	STOCK

Was a chemical/bacteriological sample submitted to Department? Yes _____ No _____; If yes, mo/day/yr sample was submitted _____

Water Well Disinfected? Yes _____ No _____

Blank casing diameter 30" in. to ft., Dia in. to ft., Dia in. to ft.
Casing height above land surface 48' in., weight lbs./ft. Wall thickness or gauge No.

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) <i>NA</i>	

SCREEN-PERFORATED INTERVALS: From NA ft. to NA ft., From . ft. to . ft.
From . ft. to . ft., From . ft. to . ft.
GRAVEL PACK INTERVALS: From . ft. to . ft., From . ft. to . ft.
From . ft. to . ft. From . ft. to . ft.

6] GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other
Grout Intervals: From 4 ft. to 7 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	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	 <i>None</i>

Direction from well? _____ How many feet? _____

[illegible]

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) 12-28-94 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 138 This Water Well Record was completed on (mo/day/yr) 12-28-94 under the business name of PETERSON IRRIGATION INC by (signature) Mike Peterson