1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number	
County: Saline	NE 1/4 NW1/4 SE1/4	1	15	4	
Distance and direction from ne	18.4-		located within city?		
	Land Developers		ker		
RR#, St. Address, Box #: 3331 S Lightville RD Board of Agriculture, Division of Water Resources City, State, ZIP Code: Salina, KS 67401 Application Number:					
MARK WELL'S LOCATION WITH 4 DEPTH OF WELL27ft.					
N WELL'S STATIC WATER LEVELft.					
	WELL WAS USED AS:				
N'W-N'E-	1 Domestic 2 Irrigation				
W		7 Lawn and Garden (only 11 Injection	well vor. Used	
×		•		2000000	
S E Was a chemical/bacteriological sample submitted to Department? YesNoX If yes, mo/day/yr sample was submitted					
s	Water Well Disinfec	ted: Yes. No			
TYPE OF BLANK CASING USED:					
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below)					
2 PVC) 4 ABS 6 AS	bestos-Cement 8 Concre	ete Tile	Ø	ЦI	
Blank casing diameter	Jin. Was casing was land surface	pulled? Yes	lo	much	
Blank casing diameterin. Was casing pulled? Yes No					
Grout Plug Intervals: From. 4.ft. to3ft., Fromft. toft., From toft.					
What is the nearest source of possible contamination:					
1 Septic tank		11 Fuel storage	16 Other (sp	ecify below)	
<pre>2 Sewer lines 3 Watertight sewer lines</pre>	7 Pit privy 8 Sewage lagoon	12 Fertilizer storag 13 Insecticide storage	ge .OP.C.M age	f.i01d	
4 Lateral lines 5 Cess Pool	9 Feedyard 10 Livestock pens	14 Abandoned water w 15 Oil well/Gas well			
Direction from well?					
FROM TO P	LUGGING MATERIALS				
27 11 chlor	inated sand.				
11 6 Sub					
	tonite		RECEIVE	D	
3 0 top.	soil				
			AUG 2 4 2004		
			BUREAU OF W	IATER	
Z CONTRACTOR (C. OR.) AND CHIEF CO.	OFFITIEIO TION TO				
On (mo/day/year)		rd is true to the bes	st of my knowledge an	d belief. Kansas	
Water Well Contractor's Lic	Junder the business name	e of 59.11.5 Q.S.A	Record was completed And. Levelope	on (mo/day/year)	
by (signature)	ense No	e of 59.11.5 Q.S.A	and Develope	ing LLC	

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: 913/296-3565. Send one to Water Well Owner and retain one for your records.