

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number
County: <u>SALINE</u>		<u>Near Center</u> $\frac{1}{4}$ <u>NE</u> $\frac{1}{4}$	<u>19</u>	<u>T 16 S</u>	<u>R 2 EW</u>
Distance and direction from nearest town or city? <u>2 mi. So. & 1-34 E. of ASSARIA KS.</u>			Street address of well if located within city?		

2 WATER WELL OWNER: <u>FRED COX JR.</u>		Board of Agriculture, Division of Water Resources Application Number: <u>35224</u>
RR#, St. Address, Box #: <u>RR #1</u>		
City, State, ZIP Code: <u>ASSARIA, KS.</u>		

3 DEPTH OF COMPLETED WELL: <u>65</u> ft. Bore Hole Diameter: <u>30</u> in. to <u>65</u> 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 Observation well
Well's static water level: _____ ft. below land surface measured on _____ month _____ day _____ year	
Pump Test Data: _____	Well water was _____ ft. after _____ hours pumping. _____ gpm
Est. Yield: <u>500</u> gpm	Well water was _____ ft. after _____ hours pumping. _____ gpm

4 TYPE OF BLANK CASING USED:		5 Wrought iron	8 Concrete tile	Casing Joints: Glued _____ Clamped <input checked="" type="checkbox"/>
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	Welded _____
2 PVC	4 ABS	7 Fiberglass		Threaded _____
Blank casing dia: <u>16</u> in. to <u>39</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.				
Casing height above land surface: <u>12</u> in., weight <u>32</u> lbs./ft. Wall thickness or gauge No. <u>25 in.</u>				
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 PVC	10 Asbestos-cement	
1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)	11 Other (specify) _____
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS	12 None used (open hole)
Screen or Perforation Openings Are:		5 Gauzed wrapped	8 Saw cut	11 None (open hole)
1 Continuous slot	3 Mill slot	6 Wire wrapped	9 Drilled holes	
2 Louvered shutter	4 Key punched	7 Torch cut	10 Other (specify) _____	
Screen-Perforation Dia: <u>16</u> in. to <u>65</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.				
Screen-Perforated Intervals: 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.				

5 GROUT MATERIAL:		1 Neat cement	2 Cement grout	3 Bentonite	4 Other _____
Grouted Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
What is the nearest source of possible contamination:		1 Septic tank	4 Cess pool	7 Sewage lagoon	10 Fuel storage
2 Sewer lines	5 Seepage pit	8 Feed yard	11 Fertilizer storage	14 Abandoned water well	
3 Lateral lines	6 Pit privy	9 Livestock pens	12 Insecticide storage	15 Oil well/Gas well	
Direction from well: <u>South</u>	How many feet: <u>800</u>	13 Watertight sewer lines	16 Other (specify below)		
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/>		Water Well Disinfected? Yes _____ No <input checked="" type="checkbox"/>			
If Yes: Pump Manufacturer's name: <u>WESTERN LAND ROLLER</u>	Model No. <u>6m</u>	HP <u>40</u>	Volts _____		
Depth of Pump Intake: <u>60</u> ft.	Pumps Capacity rated at: <u>450</u> gal./min.				
Type of pump:	1 Submersible	2 Turbine	3 Jet	4 Centrifugal	
				5 Reciprocating	
				6 Other _____	

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on _____ month _____ day _____ year	
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>138</u>	
This Water Well Record was completed on _____ month _____ day _____ year under the business name of <u>PETERSON IRRIGATION INC.</u> by (signature) <u>Mike Peterson</u>	

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
	<u>0</u>	<u>4</u>	<u>Top Soil</u>	<u>64</u>	<u>65</u>	<u>GRAY SHALE</u>
	<u>4</u>	<u>7</u>	<u>Silty BROWN Clay</u>			
	<u>7</u>	<u>26</u>	<u>BROWN Clay</u>			
	<u>26</u>	<u>28</u>	<u>FINE SAND & Clay</u>			
	<u>28</u>	<u>37</u>	<u>GREEN Clay</u>			
	<u>37</u>	<u>42</u>	<u>GRAY Clay</u>			
	<u>42</u>	<u>47</u>	<u>FINE SAND & Clay</u>			
	<u>47</u>	<u>48</u>	<u>GRAY Clay</u>			
	<u>48</u>	<u>59</u>	<u>MEDIUM COARSE SAND</u>			
	<u>59</u>	<u>62</u>	<u>GREEN Clay</u>			
	<u>62</u>	<u>64</u>	<u>GRAY Clay</u>			

ELEVATION:		Depth(s) Groundwater Encountered 1. <u>42</u> ft. 2. _____ ft. 3. _____ ft. 4. _____ ft.	(Use a second sheet if needed)
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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, Division of Environment, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.