

1 LOCATION OF WATER WELL: County: RENO NE 1/4 SW 1/4 NW 1/4		Section Number 17		Township Number T 23 S		Range Number R 5 EW																																											
Distance and direction from nearest town or city street address of well if located within city? Lorraine Street & Carey Blvd North 500'																																																	
2 WATER WELL OWNER: Carey Salt RR#, St. Address, Box #: P.O. Box 1728 City, State, ZIP Code: Hutchinson, KS 67504-1728																																																	
Board of Agriculture, Division of Water Resources WELL #3 Application Number:																																																	
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: 55 ft. ELEVATION:																																															
		Depth(s) Groundwater Encountered 1. 10 ft. 2. ft. 3. ft. WELL'S STATIC WATER LEVEL 1.7 ft. below land surface measured on mo/day/yr 3-26-88 Pump test data: Well water was N/A ft. after hours pumping gpm Est. Yield gpm: Well water was ft. after hours pumping gpm Bore Hole Diameter 8 in. to 55 ft., and in. to ft. WELL WATER TO BE USED AS: 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 Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes X No																																															
5 TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued X Clamped XXEVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded Blank casing diameter 4 in. to 45 ft., Dia. in. to ft., Dia. in. to ft. Casing height above land surface 24 in., weight 160 lbs./ft. Wall thickness or gauge No. TYPE OF SCREEN OR PERFORATION MATERIAL: XXEVC 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: 1 Continuous slot 3 Mill slot 5 Gauzed wrapped XXEVC Saw cut 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes 7 Torch cut 10 Other (specify) SCREEN-PERFORATED INTERVALS: From 45 ft. to 55 ft., From ft. to ft. GRAVEL PACK INTERVALS: From 20 ft. to 55 ft., From ft. to ft. From ft. to ft., From ft. to ft.																																																	
6 GROUT MATERIAL: X Cement 2 Cement grout 3 Bentonite 4 Other Grout Intervals: From 0 ft. to 20 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 NONE Direction from well? How many feet?																																																	
<table><tr><td>FROM</td><td>TO</td><td>LITHOLOGIC LOG</td><td>FROM</td><td>TO</td><td>LITHOLOGIC LOG</td></tr><tr><td>0</td><td>3</td><td>TS</td><td></td><td></td><td></td></tr><tr><td>3</td><td>10</td><td>CLAY</td><td></td><td></td><td></td></tr><tr><td>10</td><td>29</td><td>MED SAND</td><td></td><td></td><td></td></tr><tr><td>29</td><td>30</td><td>CLAY</td><td></td><td></td><td></td></tr><tr><td>30</td><td>55</td><td>MED SAND</td><td></td><td></td><td></td></tr><tr><td>55</td><td></td><td>SHALE</td><td></td><td></td><td></td></tr></table>								FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG	0	3	TS				3	10	CLAY				10	29	MED SAND				29	30	CLAY				30	55	MED SAND				55		SHALE			
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 3-26-88 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 451 This Water Well Record was completed on (mo/day/yr) 3-28-88 under the business name of Craig Haldeman Well Drilling by (signature) Mike Flowers																																																	
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 Protection, Topeka, Kansas 66620-7320, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.																																																	