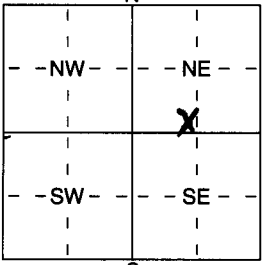


1935
606.75

WATER WELL RECORD Form WWC-5 KSA 82a-1212 ID No.

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>RILEY</u>		<u>SR 1/4 SW 1/4 NR 1/4</u>	<u>13</u>	T <u>10</u> S	R <u>7</u> <u>EW</u>
Distance and direction from nearest town or city street address of well if located within city? <u>444 OAKDALE DRIVE MANHATTAN, KS</u>					
2 WATER WELL OWNER: <u>TROY HANSLEY</u>					
RR#, St. Address, Box # : <u>444 OAKDALE DR</u>			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : <u>MANHATTAN, KS 66502</u>			Application Number:		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL <u>185</u> ft. ELEVATION: _____			
		Depth(s) Groundwater Encountered <u>1</u> <u>92</u> ft. 2 _____ ft. 3 _____ ft.			
		WELL'S STATIC WATER LEVEL _____ ft. below land surface measured on mo/day/yr _____			
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm			
WELL WATER TO BE USED AS:					
1 Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well					
2 Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering 12 Other (Specify below)					
7 Domestic (lawn & garden) 10 Monitoring well <u>CLOSED L.W. GEOTHERMAL</u>					
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> ; If yes, mo/day/yr sample was submitted					
Water Well Disinfected? Yes _____ No <u>X</u>					
5 TYPE OF BLANK CASING USED:					
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____					
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded <u>X</u>					
Blank casing diameter <u>3/4</u> in. to <u>185</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.					
Casing height <u>below</u> land surface <u>60</u> in., weight _____ lbs./ft. Wall thickness or gauge No. <u>SPR 11</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 10 Asbestos-Cement					
2 Brass 4 Galvanized Steel 6 Concrete tile 8 RMP (SR) 11 Other (Specify) _____					
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot 3 Mill slot 5 Guazed wrapped 8 Saw cut 11 None (open hole)					
2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes 10 Other (specify) _____ ft.					
SCREEN-PERFORATED INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____					
Grout Intervals: From <u>5</u> ft. to <u>185</u> 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 <u>HOUSE</u>					
Direction from well? <u>EAST</u> How many feet? <u>15</u>					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	6	CLAY			
6	23	LEMASTONE			
23	41	SHALE, GRAY TO RED			
41	43	LEMASTONE			
43	85	SHALE, GRAY			
85	92	LEMASTONE H ₂ O			
92	135	SHALE, GRAY/RED			
135	138	LEMASTONE			
138	171	SHALE, GRAY			
171	173	LEMASTONE			
173	185	SHALE, GRAY			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This <u>geothermal</u> well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>11/16/04</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No <u>505</u> This Water Well Record was completed on (mo/day/yr) <u>12/23/04</u> under the business name of <u>ASSOCIATED ENVIRONMENTAL INC.</u> by (signature) <u>[Signature]</u>					
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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.					