17

USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

1 M E. Kents

WATER WELL RECORD
KSA 82a-1201-1215

SW NE NE

Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

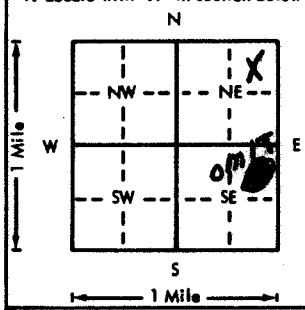
1. Location of well:	County	Fraction	Section number	Township number	Range number
	Riley	NE 1/4 NE 1/4 NE 1/4	6	T 9 10 S	R 6 7 E/W

2. Distance and direction from nearest town or city: 5.5 W
Street address of well location if in city: of Manhattan

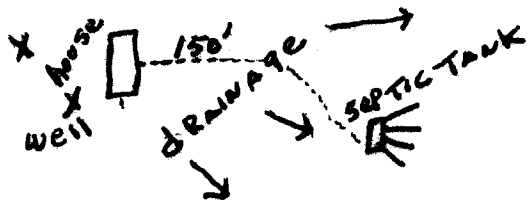
3. Owner of well: Jack Neef
R.R. or street: RFD 2
City, state, zip code: Manhattan, KS

White Tail level

4. Locate with "X" in section below:



Sketch map:



6. Bore hole dia. 10 in. Completion date 11-6-75
Well depth 110 ft. 11-6-75

7. __ Cable tool X Rotary __ Driven __ Dug
__ Hollow rod __ Jetted __ Bored __ Reverse rotary

8. Use: X Domestic __ Public supply __ Industry
__ Irrigation __ Air conditioning __ Stock
__ Lawn __ Oil field water __ Other

9. Casing: Material PVC Height (Above) or below
Threaded ___ Welded GL Surface 24 in.
RMP ___ PVC X Weight 2.33 lbs./ft.
Dia. 5 in. to 110 ft. depth Wall Thickness: inches or
Dia. ___ in. to ___ ft. depth gage No. 214

5. Type and color of material	From	To
Top Soil	0	4
Brown Clay	4	48
Limestone (Brown)	45	52
Shale (Blue)	52	69
Limeston (grey)	69	75
7 Shale (grey)	75	92
Limestone (yellow-Broken-Loose)	92	96
Shale (Blue)	96	110

(Use a second sheet if needed)

10. Screen: Manufacturer's name PUMP CO
Type PVC Dia. 5"
(Slot) gauze 80 Length 20'
Set between 90 ft. and 110 ft.
___ ft. and ___ ft.
Gravel pack? Yes Size range of material 4 x 6

11. Static water level: mo./day/yr.
60 ft. below land surface Date 11-6-75

12. Pumping level below land surfaces: Air Test
___ ft. after ___ hrs. pumping ___ g.p.m.
___ ft. after ___ hrs. pumping ___ g.p.m.
Estimated maximum yield 45 g.p.m.

13. Water sample submitted: mo./day/yr.
__ Yes X No Date ___

14. Well head completion: CAP TOP
NO Pitless adapter ___ Inches above grade

15. Well grouted? Yes
With: X Neat cement ___ Bentonite ___ Concrete
Depth: From 0 ft. to 10 ft.

16. Nearest source of possible contamination:
ft. 150 Direction S Type Septic Tank
Well disinfected upon completion? X Yes ___ No

17. Pump: X Not installed
Manufacturer's name ___
Model number ___ HP ___ Volts ___
Length of drop pipe ___ ft. capacity ___ g.p.m.
Type:
__ Submersible __ Turbine
__ Jet __ Reciprocating
__ Centrifugal __ Other

18. Elevation: 1140
Topography:
__ Hill
X Slope
__ Upland
__ Valley

19. Remarks:
I will Install slab around well.
Jack Neef

20. Water well contractor's certification:
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Steadac Dalg Co Inc 182
Business name License No.
Address RT1 Holton Kans
Signed [signature] Date 11-7-75
Authorized representative

T 9 R 6 W Sec 6 NE NE NE 1/4 1/4 1/4

Forward the white, blue and pink copies to the Department of Health and Environment

Form WWC-5

MI-1083