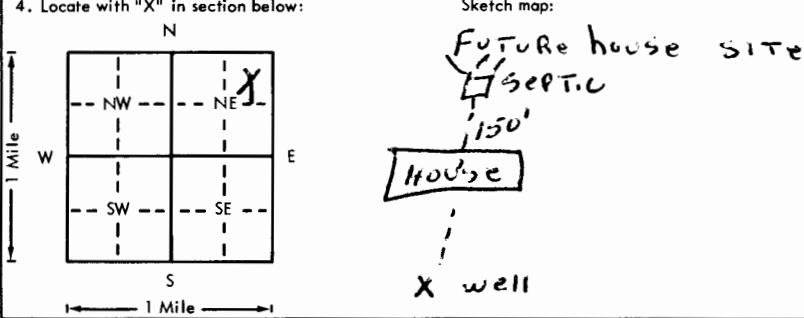


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

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

Lot # 39

1. Location of well:	County Riley	Fraction NE 1/4 NE 1/4 NE 1/4	Section number 10	Township number T 10 S	Range number R 7 E
2. Distance and direction from nearest town or city:	.5 W of		3. Owner of well: LITTLE KITCHEN CR. FWC.		
Street address of well location if in city:	MANHATTAN		R.R. or street: 1919 Indiana City, state, zip code: MANHATTAN KS		
4. Locate with "X" in section below:	Sketch map:		6. Bore hole dia. 8 in. Completion date 5-9-78 Well depth 100 ft.		
			7. Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary		
5. Type and color of material	From	To	8. Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		
TOP SOIL	0	3	9. Casing: Material PVC Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 24 in. RMP <input type="checkbox"/> PVC 46 Weight 2,500 lbs./ft. Dia. 5 in. to 100 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth Gauge No. 1274		
Clay BROWN	3	20	10. Screen: Manufacturer's name PUMPCO MPI Type PVC Dia. 5 Slot gauge .060 Length 20 Set between 17 ft. and 37 ft. ft. and <input type="checkbox"/> ft.		
CHERT GRAVEL	20	22	Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/4 X 1/8		
Clay BLUE	22	24	11. Static water level: <input type="checkbox"/> mo./day/yr. 20 ft. below land surface Date 5-9-78		
Shaley Limestone GR	24	57	12. Pumping level below land surfaces: ft. after <input type="checkbox"/> hrs. pumping 20 g.p.m. ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <input type="checkbox"/> g.p.m.		
Limestone TAN	57	65	13. Water sample submitted: <input type="checkbox"/> mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date <input type="checkbox"/>		
Shale Grey	65	72	14. Well head completion: cap Pitless adapter 24 inches above grade		
Limestone TAN	72	80	15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 15 ft.		
Shaley Grey Limestone Grey	80	98	16. Nearest source of possible contamination: ft. 130 Direction N Type SEPTIC Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Shaley white GR	98	100	17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <input type="checkbox"/> Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/> Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> g.p.m. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other		
(Use a second sheet if needed)					
18. Elevation:	19. Remarks:		20. Water well contractor's certification:		
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	OWNER TO INSTALL SIAB		This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. Strader Drig Co Inc 192 Business name License No. Address RT 1 Holton, KS Signed Dale Rabrum Date 5-11-78 Authorized representative		

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

Form WWC-5