

Before May 1 1980

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 21 City add. 130' X 168.38'

1. Location of well: County <u>Riley</u> Fraction <u>SW 1/4 SW 1/4 SW 1/4</u> Section number <u>28</u> Township number <u>T 10 S R 7 E 4</u> Range number <u>7</u>	
2. Distance and direction from nearest town or city: <u>1 mi SW on 18 Hwy</u> 3. Owner of well: <u>Glen Jensen</u> Street address of well location if in city: <u>1409 Daniel Dr.</u> R.R. or street: <u>2406 Charlis</u> City, state, zip code: <u>Manhattan Kans</u>	
4. Locate with "X" in section below: Sketch map: 	
6. Bore hole dia. <u>12</u> in. Completion date <u>4-10-80</u> Well depth <u>70</u> ft.	
7. <input checked="" type="checkbox"/> Cable tool <input 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	
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	
9. Casing: Material <u>steel</u> Height: <u>Above</u> or below Threaded <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12</u> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight <u> </u> lbs./ft. Dia. <u>7</u> in. to <u>70</u> ft. depth Wall Thickness: <u>1/2 in</u> Dia. <u> </u> in. to <u> </u> ft. depth gage No. <u> </u>	
10. Screen: Manufacturer's name <u>Southern</u> Type <u>steel</u> Dia. <u>7"</u> Slot/gauge <u>0.60</u> Length <u>5'</u> Set between <u>65</u> ft. and <u>70</u> ft. <u> </u> ft. and <u> </u> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>6X4</u>	
11. Static water level: <u> </u> mo./day/yr. <u>30</u> ft. below land surface Date <u>4-10-80</u>	
12. Pumping level below land surfaces: <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. Estimated maximum yield <u>30</u> g.p.m.	
13. Water sample submitted: <u> </u> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <u> </u>	
14. Well head completion: <u>NA</u> <input type="checkbox"/> Pitless adapter <u> </u> inches above grade	
15. Well grouted? <input checked="" type="checkbox"/> <u>1-2'</u> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>19</u> ft. to <u>9</u> ft.	
16. Nearest source of possible contamination: <u>100</u> ft. Direction <u>South</u> Type <u>Septic tank</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <u> </u> Model number <u> </u> HP <u> </u> Volts <u> </u> Length of drop pipe <u> </u> ft. capacity <u> </u> 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: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley	19. Remarks: 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. <u>Strader Drilling Co 237</u> Business name <u>Blue Rapids</u> License No. <u> </u> Address <u> </u> Signed <u>Harold Strader</u> Date <u>4-10-80</u> Authorized representative

10-7-28 SW 1/4 SW 1/4

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

Form WWC-5