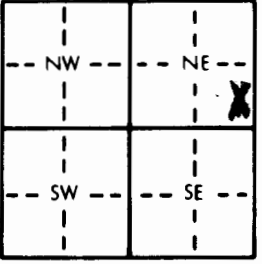


1 LOCATION OF WATER WELL: County: Riley Fraction: E SIDE 1/4 SE 1/4 NE 1/4 Section Number: 28 Township Number: T 10 S Range Number: R 7 EW

Distance and direction from nearest town or city street address of well if located within city?  
 From W edge of Manhattan: 1 1/2 mi. W on K-18 - 1 1/2 mi. SW - 1/2 mi. W - 3/4 mi. N.

2 WATER WELL OWNER: Mr. Richard E. Britt  
 RR#, St. Address, Box #: Rt. 1 Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: Manhattan, KS 66502 Application Number: 36,901

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:  
  
 4 DEPTH OF COMPLETED WELL: 62 ft. ELEVATION: .....  
 Depth(s) Groundwater Encountered 1. 13 ft. 2. .... ft. 3. .... ft.  
 WELL'S STATIC WATER LEVEL 13 ft. below land surface measured on mo/day/yr 3-20-84  
 Pump test data: Well water was 24 ft. after 1 hours pumping 1000 gpm  
 Est. Yield 1500 gpm: Well water was 31 ft. after 1 hours pumping 1200 gpm  
 Bore Hole Diameter: 32 in. to ..... ft., and ..... in. to ..... ft.  
 WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well  
 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 sub-  
 mitted Water Well Disinfected? Yes No X

5 TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued ..... Clamped X.....  
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded .....  
 7 Fiberglass Threaded.....  
 Blank casing diameter 16 in. to 39 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.  
 Casing height above land surface 12 in., weight ..... lbs./ft. Wall thickness or gauge No. ....  
 TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement  
 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 8 Saw cut 11 None (open hole)  
 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes 10 Other (specify) .....  
 7 Torch cut  
 SCREEN-PERFORATED INTERVALS: From (PVC) 62 ft. to 52 ft., From ..... ft. to ..... ft.  
 From (Asb. Cem.) 52 ft. to 39 ft., From ..... ft. to ..... ft.  
 GRAVEL PACK INTERVALS: From 10 ft. to 62 ft., From ..... ft. to ..... ft.  
 From ..... ft. to ..... ft., From ..... ft. to ..... ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other .....  
 Grout Intervals: From 0 ft. to 10 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?

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	<u>13</u>	brown sandy loam			
1	<u>9</u>	fine brown silt			
0	<u>10</u>	fine brown sand			
10	<u>12</u>	small brown gravel			
12	<u>16</u>	fine brown sand			
16	<u>21</u>	md.-lg. brown gravel			
21	<u>23</u>	fine brown sand			
23	<u>30</u>	sm.-med. brown gravel			
30	<u>32</u>	" " " & gray clay			
<u>32</u>	<u>34</u>	sm.-med. brown sand			
34	<u>58</u>	sm. brown gravel			
<u>58</u>	<u>62</u>	med.-lg. brown gravel			
	<u>62</u>	Hard brown shale STOPPED			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 3-20-84 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 323 This Water Well Record was completed on (mo/day/yr) 4-9-84 under the business name of Hoobler Drilling Company by (signature) Donald A. Hoobler  
 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, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY T 10 R 7 EW SEC. 28 E 1/4 SE 1/4 NE 1/4

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