

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

1. Location of well: County Riley		Fraction NW 1/4 NW 1/4 NW 1/4		Section number 33		Township number T 10 S R 7 E/W		Range number	
2. Distance and direction from nearest town or city: 5 m W				3. Owner of well: EUGENE CURBEY					
Street address of well location if in city: OF MANHATTAN				R.R. or street: RFD 2					
				City, state, zip code: MANHATTAN, KS.					
4. Locate with "X" in section below:		Sketch map:				6. Bore hole dia. <u>10</u> in. Completion date _____			
						Well depth <u>50</u> ft. 2-23-76			
						7. <input checked="" type="checkbox"/> 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			
						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>PVC</u> Height: <u>Above</u> or below			
						Threaded _____ Welded _____ Surface <u>24</u> in.			
						RMP _____ PVC <u>64</u> Weight <u>2.58</u> lbs./ft.			
						Dia. <u>5</u> in. to <u>50</u> ft. depth Wall Thickness: inches or			
						Dia. _____ in. to _____ ft. depth gage No. <u>1258</u>			
5. Type and color of material		From		To		10. Screen: Manufacturer's name _____			
						<u>Pumpco</u>			
						Type <u>PVC</u> Dia. <u>5"</u>			
						Slot/gouze <u>.080</u> Length <u>5'</u>			
						Set between <u>45</u> ft. and <u>50</u> ft.			
						_____ ft. and _____ ft.			
						Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/4 X 1/8</u>			
						11. Static water level: _____ mo./day/yr.			
						<u>22</u> ft. below land surface Date 2-23-76			
						12. Pumping level below land surfaces: <u>AIR TEST</u>			
						_____ ft. after _____ hrs. pumping _____ g.p.m.			
						_____ ft. after _____ hrs. pumping _____ g.p.m.			
						Estimated maximum yield <u>50</u> g.p.m.			
						13. Water sample submitted: _____ mo./day/yr.			
						Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____			
						14. Well head completion: <u>CAPPED</u>			
						<input type="checkbox"/> Pitless adapter <u>24</u> inches above grade			
						15. Well grouted? <input checked="" type="checkbox"/>			
						With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete			
						Depth: From <u>0</u> ft. to <u>10</u> ft.			
						16. Nearest source of possible contamination:			
						ft. <u>100</u> Direction <u>S</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 _____			
						Model number _____ HP _____ Volts _____			
						Length of drop pipe _____ ft. capacity _____ 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: <u>OWNER WILL INSTALL SLAB</u>				20. Water well contractor's certification:			
Topography:						This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.			
<input type="checkbox"/> Hill						<u>STRAKER DALS CO INC 182</u>			
<input type="checkbox"/> Slope						Business name _____ License No. _____			
<input type="checkbox"/> Upland						Address <u>RT 1 HOLTON, KS</u>			
<input checked="" type="checkbox"/> Valley						Signed <u>Dale Robinson</u> Date <u>2-23-76</u>			

T 10 S R 7 E/W
 Sec 33
 NW 1/4 NW 1/4 NW 1/4

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

Form WWC-5