

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	Range number 7	E/W
2. Distance and direction from nearest town or city: Street address of well location if in city:			3. Owner of well: R.R. or street: City, state, zip code:				
2.5 NE of Odgen			Bill Avery 221 Wyandotte Manhattan, KS				
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>10</u> in. Completion date _____ Well depth <u>48</u> ft. <u>11-2-77</u>			
				7. <input 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			
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	6	9. Casing: Material <u>PVC</u> Height: <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>29</u> in. RMP <input type="checkbox"/> PVC <u>4L</u> Weight <u>258</u> lbs./ft. Dia. <u>5</u> in. to <u>48</u> ft. depth, Wall Thickness: inches or Dia. _____ in. to _____ ft. depth, gage No. <u>279</u>			
Clay, BROWN		6	30	10. Screen: Manufacturer's name _____ Type <u>PVC</u> Dia. <u>5</u> Slot/gauge <u>.020</u> Length <u>10</u> Set between <u>39</u> ft. and <u>48</u> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>10/30/100</u>			
FINE SAND - COARSE SAND		30	35	11. Static water level: _____ mo./day/yr. <u>20</u> ft. below land surface Date <u>11-2-77</u>			
SAND, GRAVEL, COARSE		35	48	12. Pumping level below land surfaces: _____ 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 type="checkbox"/> No <input checked="" type="checkbox"/> Date _____			
				14. Well head completion: <u>CAP</u> <input type="checkbox"/> Pitless adapter <u>29</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>5</u> ft. to <u>15</u> ft.			
				16. Nearest source of possible contamination: ft. <u>200</u> Direction <u>E</u> Type <u>SEPTIC</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:		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>STRAIDER Drilling Co</u> <u>182</u> Business name License No. Address <u>RT 1 Holton, KS</u> Signed <u>Dale Peterson</u> Date <u>11-4-77</u> Authorized representative			
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley		OWNER TO INSIAL SIAB					

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10-70-33
NW 1/4

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

Form WWC-5