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: SW 1/4 S 1/4 S 1/4	Section number: 36	Township number: 10 T Manhattan S	Range number: 7 R (E/W)

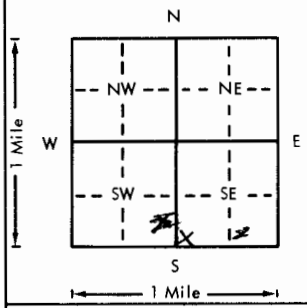
2. Distance and direction from nearest town or city:

Street address of well location if in city: Rogers Blvd

3. Owner of well: Ronald S & Jean H. Lee
R.R. or street: 1513 Nichols (Through 1979)
City, state, zip code: Manhattan, Kans. 66509

4. Locate with "X" in section below:

Sketch map:



6. Bore hole dia. 8 in. Completion date 5-12-78
Well depth 72 ft.

7. __ Cable tool X Rotary __ Driven __ Dug
__ Hollow rod __ Jetted __ Bored __ Reverse rotary

8. Use: X Domestic __ Public supply __ Industry
__ Irrigation __ Air conditioning __ Stock
__ Lawn __ Oil field water __ Other

9. Casing: Material PVC Height: Above or below
Threaded ___ Welded ___ Surface 12 in.
RMP ___ PVC ___ Weight 200 lbs./ft.
Dia. 5 in. to 72 ft. depth Wall Thickness: inches or
Dia. ___ in. to ___ ft. depth gage No. 200

10. Screen: Manufacturer's name plastic
NSF approved #200
Type plastic Dia. 5
Slot/gauze .030 Length 20
Set between 50 ft. and 70 ft.
___ ft. and ___ ft.
Gravel pack? X Size range of material Well Gravel

5. Type and color of material	From	To
soil Top	0	1
clay Brown	1	13
clay White	13	19
Rock course Loose	19	21
Sand fine	21	25
clay Tan	25	41
sand med fine	41	45
clay yellow	45	50
sand med fine	50	57
clay yellow	57	59
shale Blue	59	61
Limestone	61	61½
clay Gray + Blue	61½	68
shale Blue	68	72
clay yellow	72	
(Use a second sheet if needed)		

11. Static water level: mo./day/yr.
36 ft. below land surface Date 5-12-78

12. Pumping level below land surfaces:
___ ft. after ___ hrs. pumping ___ g.p.m.
___ ft. after ___ hrs. pumping ___ g.p.m.
Estimated maximum yield ___ g.p.m.

13. Water sample submitted: mo./day/yr.
__ Yes X No Date ___

14. Well head completion: capped
__ Pitless adapter ___ Inches above grade

15. Well grouted? yes
With: __ Neat cement __ Bentonite X Concrete
Depth: From 0 ft. to 20 ft.

16. Nearest source of possible contamination: none
ft. ___ Direction ___ Type ___
Well disinfected upon completion? X Yes __ No

17. Pump: X Not installed
Manufacturer's name ___
Model number ___ HP ___ Volts ___
Length of drop pipe ___ ft. capacity ___ g.p.m.
Type:
__ Submersible __ Turbine
__ Jet __ Reciprocating
__ Centrifugal __ Other

18. Elevation:

Topography:
__ Hill
__ Slope
__ Upland
__ 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.
Business name Blue Valley Drilling License No. 234
Address Blue Rapids Ks 66411
Signed Gerald Stuber Date 8-30-78
Authorized representative

T 10 R 7 (E/W) Sec 36 1/4 SW 1/4 SW 1/4 SE

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

Form WWC-5

M1-1023