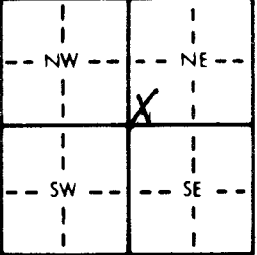


|                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |      |                                                                                                                                   |                |                 |                      |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|-----------------------------------------------------------------------------------------------------------------------------------|----------------|-----------------|----------------------|
| 1 LOCATION OF WATER WELL:                                                                                                                                                                                                                                                                                                                                                                                                                                                     |      | Fraction                                                                                                                          | Section Number | Township Number | Range Number         |
| County: <u>Riley</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                          |      | <u>SW 1/4 SW 1/4 NE 1/4</u>                                                                                                       | <u>36</u>      | T <u>10</u> S   | R <u>7</u> <u>EW</u> |
| Distance and direction from nearest town or city street address of well if located within city?                                                                                                                                                                                                                                                                                                                                                                               |      |                                                                                                                                   |                |                 |                      |
| 2 WATER WELL OWNER: <u>Riley County</u><br>RR#, St. Address, Box #: <u>110 Court House Plaza</u><br>City, State, ZIP Code: <u>MANHATTAN KS 66501</u>                                                                                                                                                                                                                                                                                                                          |      |                                                                                                                                   |                |                 |                      |
| Board of Agriculture, Division of Water Resources<br>Application Number:                                                                                                                                                                                                                                                                                                                                                                                                      |      |                                                                                                                                   |                |                 |                      |
| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:                                                                                                                                                                                                                                                                                                                                                                                                                          |      | 4 DEPTH OF COMPLETED WELL: <u>320</u> ft. ELEVATION: <u>22</u> ft.                                                                |                |                 |                      |
|                                                                                                                                                                                                                                                                                                                                                                                               |      | Depth(s) Groundwater Encountered 1. <u>22</u> ft. 2. <u>21.5</u> ft. 3. <u>5-3-91</u> ft.                                         |                |                 |                      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |      | WELL'S STATIC WATER LEVEL <u>21.5</u> ft. below land surface measured on mo/day/yr <u>5-3-91</u>                                  |                |                 |                      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |      | Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm                                                      |                |                 |                      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |      | Est. Yield _____ gpm Well water was _____ ft. after _____ hours pumping _____ gpm                                                 |                |                 |                      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |      | Bore Hole Diameter <u>10</u> in. to <u>32.5</u> 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 <u>19</u> Monitoring well                                                        |                |                 |                      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |      | Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> If yes, mo/day/yr sample was submitted _____ |                |                 |                      |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |      | Water Well Disinfected? Yes _____ No <u>X</u>                                                                                     |                |                 |                      |
| 5 TYPE OF BLANK CASING USED:                                                                                                                                                                                                                                                                                                                                                                                                                                                  |      |                                                                                                                                   |                |                 |                      |
| 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____                                                                                                                                                                                                                                                                                                                                                                                    |      |                                                                                                                                   |                |                 |                      |
| 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____                                                                                                                                                                                                                                                                                                                                                                                                            |      |                                                                                                                                   |                |                 |                      |
| 3 Fiberglass _____ Threaded <u>X</u>                                                                                                                                                                                                                                                                                                                                                                                                                                          |      |                                                                                                                                   |                |                 |                      |
| Blank casing diameter _____ in. to _____ ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.                                                                                                                                                                                                                                                                                                                                                                            |      |                                                                                                                                   |                |                 |                      |
| Casing height above land surface <u>36</u> in. weight <u>sch 40</u> 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 11 Other (specify) _____                                                                                                                                                                                                                                                                                                                                                                                                     |      |                                                                                                                                   |                |                 |                      |
| 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                                                                                                                                                                                                                                                                                                                                                                                                               |      |                                                                                                                                   |                |                 |                      |
| 7 Torch cut 10 Other (specify) _____                                                                                                                                                                                                                                                                                                                                                                                                                                          |      |                                                                                                                                   |                |                 |                      |
| SCREEN-PERFORATED INTERVALS: From _____ ft. to _____ ft. From _____ ft. to _____ ft.                                                                                                                                                                                                                                                                                                                                                                                          |      |                                                                                                                                   |                |                 |                      |
| GRAVEL PACK INTERVALS: From <u>32.5</u> ft. to <u>19.5</u> ft. From _____ ft. to _____ ft.                                                                                                                                                                                                                                                                                                                                                                                    |      |                                                                                                                                   |                |                 |                      |
| 6 GROUT MATERIAL: 1 Neat cement 3 Cement grout 4 Other                                                                                                                                                                                                                                                                                                                                                                                                                        |      |                                                                                                                                   |                |                 |                      |
| Grout Intervals: From <u>0</u> ft. to <u>3</u> ft. From <u>3</u> ft. to <u>19.5</u> 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) <u>LANDFILL</u>                                                                                                                                                                                                                                                                                                                                                              |      |                                                                                                                                   |                |                 |                      |
| 13 Insecticide storage                                                                                                                                                                                                                                                                                                                                                                                                                                                        |      |                                                                                                                                   |                |                 |                      |
| Direction from well? _____ How many feet? _____                                                                                                                                                                                                                                                                                                                                                                                                                               |      |                                                                                                                                   |                |                 |                      |
| LITHOLOGIC LOG                                                                                                                                                                                                                                                                                                                                                                                                                                                                |      |                                                                                                                                   |                |                 |                      |
| FROM                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | TO   | LITHOLOGIC LOG                                                                                                                    |                |                 |                      |
| 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 14   | SANDY SILT & SILTY SAND                                                                                                           |                |                 |                      |
| 14                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 22   | FINE SAND                                                                                                                         |                |                 |                      |
| 22                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 25   | Med SAND                                                                                                                          |                |                 |                      |
| 25                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 32.5 | COARSE SAND                                                                                                                       |                |                 |                      |
| PLUGGING INTERVALS                                                                                                                                                                                                                                                                                                                                                                                                                                                            |      |                                                                                                                                   |                |                 |                      |
| FROM                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | TO   | PLUGGING INTERVALS                                                                                                                |                |                 |                      |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>1</u> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>5-3-91</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>416</u> This Water Well Record was completed on (mo/day/yr) <u>6-21-91</u> under the business name of <u>FERRACONS CONSULTANTS</u> by (signature) <u>EL MKE</u> |      |                                                                                                                                   |                |                 |                      |
| 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, Bureau of Water, Topeka, Kansas 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.                                                                                                               |      |                                                                                                                                   |                |                 |                      |