

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <b>Riley</b>		$\frac{1}{4}$ S $1\frac{1}{2}$ $\frac{1}{4}$ NE $\frac{1}{4}$	<b>36</b>	<b>T 10 S</b>	<b>R 7 E/W</b>
Distance and direction from nearest town or city street address of well if located within city? <b>1 mile west Manhattan, Kansas</b> <span style="float:right"><b>28D</b></span>					
2 WATER WELL OWNER: <b>Riley County</b>					
RR#, St. Address, Box # : <b>110 Courthouse Plaza</b>			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : <b>Manhattan, Kansas 66502</b>			Application Number:		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <b>45.5</b> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. <b>15.5</b> ft. 2. ft. 3. ft.			
		WELL'S STATIC WATER LEVEL ft. below land surface measured on mo/day/yr			
		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: <b>10.5</b> in. to ft. and in. to ft.			
WELL WATER TO BE USED AS:					
1 Domestic      3 Feedlot      6 Oil field water supply      9 Dewatering      12 Other (Specify below) 2 Irrigation      4 Industrial      7 Lawn and garden only <b>10</b> Monitoring well					
Was a chemical/bacteriological sample submitted to Department? Yes.....No.....; If yes, mo/day/yr sample was submitted					
Water Well Disinfected? Yes No					
5 TYPE OF BLANK CASING USED:					
1 Steel      3 RMP (SR)      5 Wrought iron      8 Concrete tile      CASING JOINTS: Glued Clamped <b>2</b> PVC      4 ABS      6 Asbestos-Cement      9 Other (specify below)      Welded Blank casing diameter <b>4"</b> in. to <b>40.5</b> ft. Dia. in. to ft. Dia. in. to ft. Casing height above land surface <b>24</b> in. weight lbs./ft. Wall thickness or gauge No. <b>sch 80</b>					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel      3 Stainless steel      5 Fiberglass <b>7</b> PVC      10 Asbestos-cement 2 Brass      4 Galvanized steel      6 Concrete tile      8 RMP (SR)      11 Other (specify) 12 None used (open hole)					
SCREEN OR PERFORATION OPENINGS ARE:					
<b>1</b> 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 <b>40.5</b> ft. to <b>44.5</b> ft. From ft. to ft.					
From <b>38.5</b> ft. to <b>45.5</b> ft. From ft. to ft.					
GRAVEL PACK INTERVALS: From <b>38.5</b> ft. to <b>45.5</b> ft. From ft. to ft.					
From ft. to ft. From ft. to ft.					
6 GROUT MATERIAL:					
1 Neat cement      2 Cement grout <b>3</b> Bentonite      4 Other <b>Concrete</b> Grout intervals: From <b>38.5</b> ft. to <b>4.0</b> ft. From ft. to ft. From <b>0</b> ft. to <b>4</b> 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					
Direction from well? How many feet?					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Silty FINE SAND			
3	8	SANDY SILT			
8	13	SILT WITH SAND			
13	18	Fine Sand with Silt			
18	38.3	Fine to Coarse SAND			
38.3	45	Fine to Coarse SAND with Limestone			
45	46	Gravel & Shale			
		SHALE			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <b>(1)</b> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <b>2/2/95</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>416</b> This Water Well Record was completed on (mo/day/yr) <b>3/2/95</b> under the business name of <b>Terracon Consultants, Inc.</b> by (signature) <i>Ronald J. White</i>					
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 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					