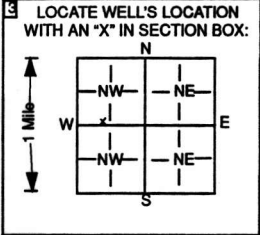


1 LOCATION OF WATER WELL: County: RILEY Fraction SE 1/4 SW 1/4 NW 1/4 Section Number 09 Township Number T 10 S Range Number R 8 E X.W.

Distance and direction from nearest town or city street address of well if located within city?
 .5 MILES EAST OF MANHATTAN IN CITY WELL FIELD

2 WATER WELL OWNER: US GEOLOGICAL SURVEY
 RR#, St. Address, Box #: 4821 QUAIL CREST PLACE Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: LAWRENCE, KS 66049 Application Number:



3 DEPTH OF COMPLETED WELL 38 ft. ELEVATION: 20
 Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL 22 ft. below land surface measured on mo/day/yr 9/15/92
 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 9 in. to 38 in. and _____ in. to _____ ft.
 WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 2 Irrigation 4 Industrial 7 Lawn and garden 10 Observation well MONITORING
 Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/day/yr sample was submitted Water well Disinfected? Yes No X

5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____
 1 Steel 3 RMP (SR) 9 Other (specify below) Welded _____
 2 PVC 4 ABS 7 Fiberglass Threaded X
 Blank casing diameter 2 in. to 31 ft. Dia. _____ in. to _____ ft. Dia. _____ in. to _____ ft.
 Casing Height above land surface 24 in. weight _____ lbs./ft. Wall thickness or gauge No. _____
 TYPES OF SCREEN OR PERFORATION MATERIAL: 7 PVC 10 Asbestos-cement
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) _____
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)
 SCREEN OF PERFORATION OPENINGS ARE: 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes
 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____
 SCREENED-PERFORATED INTERVALS: From 36 ft. to 31 ft. From _____ ft. to _____ ft.
 From _____ ft. to _____ ft. From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 36 ft. to 21 ft. From _____ ft. to _____ ft.
 From _____ ft. to _____ ft. From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat Cement 2 Cement grout 3 Bentonite Other _____
 Grout Intervals: From 21 ft. to 0 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.
 What is the nearest source of possible contamination:
 1 Septic tank 4 Lateral lines 7 Pit privy 10 Asbestos-cement 14 Abandoned water well
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 15 Oil well/Gas well
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 None used (open hole) 16 Other (specify below)
 Direction from well? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	10	SILT/SILTY SAND			
10	20	MED. SAND			
20	38	COURSE SAND/MED GRAVEL			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 9-15-92 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. _____ This Water Well Record was completed on (mo/day/year) 9-28-92 under the business name of USGS, WRD by (signature) Dick Hamadani

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 Protection, Topeka, Kansas 66620-7320, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.

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