

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 <u>Riley</u>		Fraction <u>SW 1/4 SW 1/4 SW 1/4</u>		Section number <u>4</u>		Township number <u>T 10 S R 8 E/W</u>		Range number			
2. Distance and direction from nearest town or city: <u>2.5 N</u>				3. Owner of well: <u>Bud Shirley</u>							
Street address of well location if in city: <u>OF MANHATTAN</u>				R.R. or street:							
				City, state, zip code: <u>MANHATTAN</u>							
4. Locate with "X" in section below:				Sketch map:				6. Bore hole dia. <u>12</u> in. Completion date _____			
								Well depth <u>120</u> ft. <u>1-18-77</u>			
								7. <input checked="" 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			
								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			
								9. Casing: Material <u>PVC</u> Height: <u>Above</u> or below			
								Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>24</u> in.			
								RMP <input type="checkbox"/> PVC <u>GL</u> Weight <u>2.25</u> lbs./ft.			
								Dia. <u>5</u> in. to <u>120</u> ft. depth Wall Thickness: inches or			
								Dia. _____ in. to _____ ft. depth gage No. <u>2.74</u>			
5. Type and color of material				From		To		10. Screen: Manufacturer's name _____			
								<u>Pumpco</u>			
<u>Top Soil</u>				<u>0</u>		<u>3</u>		Type <u>PVC</u> Dia. <u>5</u>			
<u>yellow silty clay</u>				<u>3</u>		<u>80</u>		<input checked="" type="checkbox"/> Slope gauze <u>0.20</u> Length <u>40</u>			
<u>Fine Sand</u>				<u>80</u>		<u>95</u>		Set between <u>80</u> ft. and <u>130</u> ft.			
								_____ ft. and _____ ft.			
<u>Limestone (shale) - grey shale</u>				<u>95</u>		<u>120</u>		Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>20-30/40-60</u>			
								11. Static water level: _____ mo./day/yr.			
								<u>50</u> ft. below land surface Date <u>1-18-77</u>			
								12. Pumping level below land surfaces: <u>AIR TEST</u>			
								_____ ft. after _____ hrs. pumping _____ g.p.m.			
								_____ ft. after _____ hrs. pumping _____ g.p.m.			
								Estimated maximum yield <u>20</u> g.p.m.			
								13. Water sample submitted: _____ mo./day/yr.			
								Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____			
								14. Well head completion: <u>SAP</u>			
								<input type="checkbox"/> Pitless adapter <u>24</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>N</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: <u>OWNER WILL INSTAL SLAB</u>				20. Water well contractor's certification:					
Topography:						This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.					
<input type="checkbox"/> Hill						<u>STRADER DRILLING CO INC 183</u>					
<input checked="" type="checkbox"/> Slope						Business name _____ License No. _____					
<input type="checkbox"/> Upland						Address <u>RT 1 Manhattan, KS</u>					
<input type="checkbox"/> Valley						Signed <u>Dale Ashburn</u> Date <u>1-18-77</u>					
						Authorized representative					

T 10 S R 8 E/W Sec 4 1/4 1/4 1/4

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

Form WWC-5