

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

64

City

1. Location of well:	County <b>Riley</b>	Fraction <del>SE 1/4 SE 1/4 SW 1/4</del>	Section number <b>15 16</b>	Township number T <b>10</b> S	Range number R <b>8</b> <b>EW</b>
2. Distance and direction from nearest town or city: <b>2 Miles east Manhattan</b>			3. Owner of well: <b>City of Manhattan</b>		
Street address of well location if in city:			R.R. or street: City, state, zip code: <b>Manhattan 66502</b>		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <b>10</b> in. Completion date <b>4/14</b> Well depth <b>46 1/2</b> ft.	
		<p><b>* Contamination Observation Well</b></p>		7. <input checked="" type="checkbox"/> Cable tool 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	
5. Type and color of material		From To		8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input checked="" type="checkbox"/> Other	
<b>Sand loam</b>		<b>0 13</b>		9. Casing: Material <b>PVC</b> Height (Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>18</b> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. <b>4</b> in. to <b>46 1/2</b> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <b>337</b>	
<b>Blue medium and fine sand</b>		<b>13 33</b>		10. Screen: Manufacturer's name <b>Pumpco</b> Type <b>slotted</b> Dia. <b>4 in.</b> (Slot) gauge <b>.060</b> Length <b>10 ft.</b> Set between <b>36 1/2</b> ft. and <b>46 1/2</b> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>1/4 in.</b>	
<b>Gray soft clay</b>		<b>33 35</b>		11. Static water level: _____ no./day/yr. <b>15</b> ft. below land surface Date <b>4/14/77</b>	
<b>Course blue sand</b>		<b>35 45</b>		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.	
<b>Rock</b>		<b>45</b>		13. Water sample submitted: _____ no./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____	
				14. Well head completion: _____ Pitless adapter <b>16" cap</b> inches above grade	
				15. Well grouted? <b>yes</b> With: _____ Neat cement <input checked="" type="checkbox"/> Bentonite _____ Concrete _____ Depth: From <b>0</b> ft. to <b>6</b> ft. <b>0-10'</b> <b>in NC</b>	
				16. Nearest source of possible contamination: _____ ft. <b>1000</b> Direction <b>East</b> Type <b>Farmstead</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
				17. Pump: Manufacturer's name <input checked="" type="checkbox"/> Not installed 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	
				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. <b>Blue Valley Drilling 234</b> Business name _____ License No. _____ Address <b>Blue Rapids, KS</b> Signed <b>Shirley Stuber</b> Date <b>2/23/77</b> Authorized representative	
18. Elevation: <b>1010</b>		19. Remarks:			
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley					

(Use a second sheet if needed)

10 - 80 W 15 16  
1/4 1/4 1/4

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

Form WWC-5