

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 Riley	Fraction C 4 NW 1/4 NW 1/4 SW 1/4	Section number 25	Township number T 10 S	Range number R 8	@W
2. Distance and direction from nearest town or city: 2 Miles east Manhattan				3. Owner of well: City of Manhattan			
Street address of well location if in city:				R.R. or street:			
				City, state, zip code: Manhattan 66502			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 10 in. Completion date 4/73 Well depth 45 1/2 ft.			
		<p>* Contamination Observation Well</p>		7. <input 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			
5. Type and color of material				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			
				9. Casing: Material PVC Height (Above or below) _____ Threaded _____ Welded <input checked="" type="checkbox"/> Surface 18 in. RMP _____ PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. 4 in. to 4 1/2 ft. depth Well Thickness: inches or _____ Dia. _____ in. to _____ ft. depth gage No. 337			
				10. Screen: Manufacturer's name Pumpco (CMT) Type slotted Dia. 4 in. Slot/pauze .060 Length 10 ft. Set between 35 1/2 ft. and 45 1/2 ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/4 in.			
				11. Static water level: _____ no./day/yr. 15 ft. below land surface Date 4/15/77			
				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.			
				13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____			
				14. Well head completion: _____ Pitless adapter 16" cap inches above grade			
				15. Well grouted? YES With: _____ Neat cement <input checked="" type="checkbox"/> Bentonite _____ Concrete _____ Depth: From 0 ft. to 6 ft. 0'-10" m H G			
				16. Nearest source of possible contamination: ft. 1000 Direction East Type Farmstead 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			
				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. Blue Valley Drilling 234 Business name _____ License No. _____ Address Blue Ravin Run Signed Gene Stuber Date 8/23/77 Authorized representative			
18. Elevation: 1010		19. Remarks:					
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley							

T 10 S
 R 8 W
 Sec 25
 NW 1/4
 NE 1/4
 SW 1/4
 SE 1/4

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

Form WWC-5