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

diamental Professional Control of the Control of th	County	Fraction (to		Section number		Township number	Range number		
1. Location of well:	Riley	NW 1/4 NW 1/4 SW	F 1/4	~15	15	т 10 s	r 8	E)W	
2. Distance and direction from necess town or city: 2 Miles east 3. (Owner of well: city of Manhattan or street: or, state, zip code: Manhattan				
4. Locate with "X" in section below: N						6. Bore hole dia. 10 in. Well depth 27 ft.	10 in. Completion date 4/14 27 ft.		
- SW		B ser i	vation	# Hollow rod Jetted # Use: Domestic Pu Irrigation Ai Lawn Oi Casing: Material PVC Threaded Welded RMP PVC 30	_ Height:\Above ar _ Surface18	below in.			
S 1 M	lile ———	A. J	:	- I		Diain. tofit. dept	h Wall Thickness: ir	nches or	
5. Type and color of	material 4 &			From	То	10. Screen: Manufacturer's n			
Sandy leam				7,5	15	Type Slotted (Slot/Jauze 030	Dia. 4 in Length 10 tt	t	
Brown med	lium ænd fine sæn	i		15	27	Set betweenft. a Gravel pack? Size rai	nd	in.	
						11. Static water level: 15 ft. below land sur	14 C	./day/yr.	
						12. Pumping level below land ft. after h	surfaces:	_ g.p.m.	
						Estimated maximum yield	mo	g.p.m.	
		NH++N+==y-				Yes No 1 14. Well head completion: Pitless adapter 16 to 1	Date	grade	
*	***************************************					15. Well grouted? Yes: With: Neat coment X	Bentonite	Concrete	
						Depth: From ft. to. 16. Necrest source of possible ft. 600 Direction	· · · · · · · · · · · · · · · · · · ·	~ ~ ~	
						Well disinfected upon comple	Yes Yes Not installed	No	
	hand					Manufacturer's name Model number Length of drap pipe	HP Vo ft . capacity		
						Type: Submersible	Turbin		
	(Use a seco	nd sheet if needed)				Jet Centrifugal	Recipr	ocating	
18. Elevation:	19. Remarks:					20. Water well contractor's of This well was drilled under m is true to the best of my know	y jurisdiction and thi ledge and belief.	s report	
Topography: Hill Slope						Blue Valley D: Business name Address Blue Re		34 cense No.	
Upland Valley				. <u>.</u>		Signed Authorized rep	Date resentative 8/2,3	777	

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

Form WWC-5