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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 <b>Riley</b>		Fraction <b>ct</b> <del>NE 1/4 NW 1/4 SW 1/4</del>		Section number <b>15</b>		Township number T <b>10</b> S R <b>8</b>		Range number <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> R.R. or street: City, state, zip code: <b>Manhattan 66502</b>																															
4. Locate with "X" in section below: N W E S 1 Mile 1 Mile				Sketch map: <b>* Contamination Observation Well</b>		6. Bore hole dia. <b>10</b> in. Completion date <b>4/14/77</b> Well depth <b>43</b> ft.																													
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>5. Type and color of material</td> <td style="text-align: center;">4 B</td> <td>From</td> <td>To</td> </tr> <tr> <td>Sandy loam</td> <td></td> <td>0</td> <td>15</td> </tr> <tr> <td>Brown medium and fine sand</td> <td></td> <td>15</td> <td>28</td> </tr> <tr> <td>Gray soft clay</td> <td></td> <td>28</td> <td>33</td> </tr> <tr> <td>Brown medium and coarse sand</td> <td></td> <td>33</td> <td>45</td> </tr> <tr> <td>Blue shale</td> <td></td> <td>45</td> <td></td> </tr> <tr> <td colspan="4" style="text-align: center;">(Use a second sheet if needed)</td> </tr> </table>				5. Type and color of material	4 B	From	To	Sandy loam		0	15	Brown medium and fine sand		15	28	Gray soft clay		28	33	Brown medium and coarse sand		33	45	Blue shale		45		(Use a second sheet if needed)				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			
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				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 <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>43</b> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth Gauge No. <b>337</b>																															
				10. Screen: Manufacturer's name <b>PRINCO</b> <b>(M.P.S.)</b> Type <b>slotted</b> Dia. <b>4 in.</b> (Slot) gauze <b>.060</b> Length <b>10 ft.</b> Set between <b>33</b> ft. and <b>43</b> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>1/2 in.</b>																															
				11. Static water level: _____ mo./day/yr. <b>15</b> ft. below land surface Date <b>4/14/77</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.																															
				13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____																															
				14. Well head completion: <input type="checkbox"/> Pitless adapter <b>16" cap</b> inches above grade																															
				15. Well grouted? <b>yes</b> With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>6</b> ft. <b>0'-10'</b>																															
				16. Nearest source of possible contamination: ft. <b>1000</b> Direction <b>East</b> Type <b>Mane</b> 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																															
18. Elevation: <b>1010</b>		19. Remarks:		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>James L. ...</b> Date <b>8/23/77</b> Authorized representative																															

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

Form WWC-5