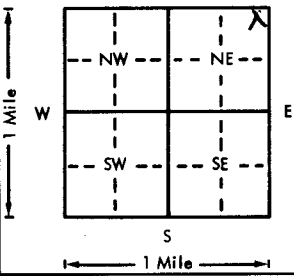
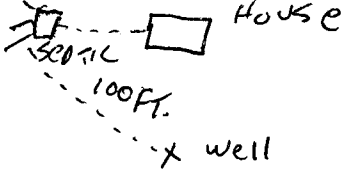


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

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>NE 1/4 NE 1/4 NE 1/4</u>	Section number <u>21</u>	Township number <u>T 10 S R 8</u>	Range number <u>E/W</u>
2. Distance and direction from nearest town or city: <u>5 SE</u>		3. Owner of well: <u>RUSTY HAMILTON</u>				
Street address of well location if in city: <u>OF MANHATTAN</u>		R.R. or street: <u>RR</u>				
		City, state, zip code: <u>MANHATTAN, KS 66502</u>				
4. Locate with "X" in section below:		Sketch map:				
						
5. Type and color of material		From	To	6. Bore hole dia. <u>10</u> in. Completion date <u>12-6-76</u>		
				Well depth <u>80</u> ft.		
				7. 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 <u>PVC 9L</u> Weight <u>2.58</u> lbs./ft.		
				Dia. <u>5</u> in. to <u>80</u> ft. depth Wall Thickness: inches or		
				Dia. <u>5</u> in. to <u>80</u> ft. depth gage No. <u>2.74</u>		
				10. Screen: Manufacturer's name <u>PUMPCO</u>		
				Type <u>PVC</u> Dia. <u>5</u>		
				Slot/gauze <u>1020</u> Length <u>10</u>		
				Set between <u>15</u> ft. and <u>25</u> ft.		
				Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>20-30</u>		
				11. Static water level: <u>18</u> ft. below land surface Date <u>12-6-76</u>		
				12. Pumping level below land surfaces:		
				____ ft. after ____ hrs. pumping ____ g.p.m.		
				____ ft. after ____ hrs. pumping ____ g.p.m.		
				Estimated maximum yield <u>2</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>CAP</u>		
				____ Pitless adapter <u>24</u> inches above grade		
				<input checked="" type="checkbox"/> Well grouted? <input checked="" type="checkbox"/>		
				With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete		
				Depth: From <u>4</u> ft. to <u>14</u> ft.		
				16. Nearest source of possible contamination: <u>5</u> ft. <u>S</u> Direction <u>S</u> Type <u>SEP. 76</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		
18. Elevation:		19. Remarks:				
Topography: ____ Hill		<u>OWNER WILL INSTALL</u>				
____ Slope						
<input checked="" type="checkbox"/> Upland						
____ Valley						
		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.				
		<u>Strader Doherty Co. Inc.</u> <u>182</u>				
		Business name License No.				
		Address <u>RT 1 Manhattan, KS</u>				
		Signed <u>Dale Peterson</u> Date <u>12-7-76</u>				
		Authorized representative				

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

Form WWC-5