

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

no. 1

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>NW 1/4 NE 1/4 SE 1/4</u> Section number <u>32</u> Township number <u>T 10 S R 8</u> Range number <u>EW</u>	
2. Distance and direction from nearest town or city: <u>3 miles south</u> Street address of well location if in city: <u>Manhattan, Kans</u>	
3. Owner of well: <u>Ronald D. Innes</u> R.R. or street: <u>2383 Grandview Terrace</u> City, state, zip code: <u>Manhattan, Kans. 66502</u>	
4. Locate with "X" in section below: Sketch map:	
5. Type and color of material	
	From To
Clay Brown	0 5
Limestone yellow	5 16
Shale	16 28
Limestone Gray + yellow	28 39
Shale Gray + Brown	39 54
Limestone	54 62
Shale	62 81
Limestone	81 94
Shale	94 121
Limestone	121 123
Shale	123 129
Limestone	129 138
Shale	138 153
Limestone	153 154
Shale	154 173
(Use a second sheet if needed)	
6. Bore hole dia. <u>3</u> in. Completion date: <u>10-10-78</u> Well depth <u>242</u> ft.	7. <input checked="" 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
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: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <u>200</u> lbs./ft. Dia. <u>5</u> in. to <u>244</u> ft. depth Wall Thickness: inches or Dia. <u>5</u> in. to <u>244</u> ft. depth Gage No. <u>200</u>
10. Screen: Manufacturer's name <u>Plastic</u> NES approved Type <u>Plastic</u> Dia. <u>5 inches</u> Slot/gauze <u>0.60</u> Length <u>60</u> Set between <u>152</u> ft. and <u>242</u> ft. Gravel pack? <u>yes</u> Size range of material <u>Wellsand</u>	11. Static water level: <u>190</u> ft. below land surface Date <u>10-10-78</u> mo./day/yr.
12. Pumping level below land surfaces: <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. Estimated maximum yield <u> </u> g.p.m.	13. Water sample submitted: <u> </u> mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date <u> </u>
14. Well head completion: <u>Capped</u> Pitless adapter <u> </u> inches above grade	15. Well grouted? <u>yes</u> With: <u> </u> Neat cement <u> </u> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>20</u> ft.
16. Nearest source of possible contamination: ft. <u>300</u> Direction <u>North</u> Type <u>water tank</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	17. Pump: <u> </u> Not installed Manufacturer's name <u> </u> Model number <u> </u> HP <u> </u> Volts <u> </u> Length of drop pipe <u> </u> ft. capacity <u> </u> 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: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley	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. <u>Blue Valley Drilling 245D</u> Business name <u>Blue Rapids, Mo 66411</u> License No. <u> </u> Address <u> </u> Signed <u>Ronald Innes</u> Date <u>11-27-78</u> Authorized representative	

T 10 S R 8 E 32 NW NE SE

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

Form WWC-5

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

No. 2,

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>NW 1/4 NE 1/4 SE 1/4</u>	Section number <u>32</u>	Township number <u>T 10 S R 8</u>	Range number <u>8</u>
2. Distance and direction from nearest town or city: Street address of well location if in city:			3. Owner of well: <u>Ronald D. Limes</u> R.R. or street: City, state, zip code:		
4. Locote with "X" in section below: N W E S 1 Mile		Sketch map: 		6. Bore hole dia. _____ in. Completion date _____ Well depth _____ ft.	
5. Type and color of material		From	To	7. <input type="checkbox"/> Cable tool <input 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	
<u>Limestone</u>		<u>193</u>	<u>204</u>	8. Use: <input 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	
<u>Shale Blue</u>		<u>204</u>	<u>242</u>	9. Casing: Material _____ Height: Above or below Threaded _____ Welded _____ Surface _____ in. RMP _____ PVC _____ Weight _____ lbs./ft. Dia. _____ in. to _____ ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. _____	
				10. Screen: Manufacturer's name _____ Type _____ Dia. _____ Slot/gauze _____ Length _____ Set between _____ ft. and _____ ft. _____ ft. and _____ ft. Gravel pack? _____ Size range of material _____	
				11. Static water level: _____ mo./day/yr. _____ ft. below land surface Date _____	
				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 _____ No _____ Date _____	
				14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade	
				15. Well grouted? _____ With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From _____ ft. to _____ ft.	
				16. Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? Yes _____ No _____	
				17. Pump: _____ 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	
		(Use a second sheet if needed)			
18. Elevation: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	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. Business name _____ License No. _____ Address _____ Signed _____ Date _____ Authorized representative	

T 10 S R 8 NW 1/4 NE 1/4 SE

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Form WWC-5