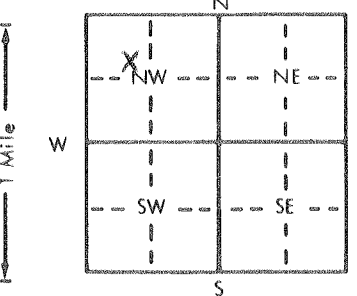


1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <u>RILEY</u>	<u>SE 1/4</u> <u>NW 1/4</u> <u>NW 1/4</u>	<u>23</u>	<u>T 11 S</u>	<u>R 6 E</u>

Distance and direction from nearest town or city street address of well if located within city?

On Fort Riley Reservation

2 WATER WELL OWNER: <u>U.S. Government</u>	WELL # <u>2</u>
RR#, St. Address, Box # : <u>Director Facility Engineering</u>	Board of Agriculture, Division of Water Resources
City, State, ZIP Code : <u>Bldg 187 Fort Riley, KS 66449</u>	Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL: <u>50</u> ft. ELEVATION: .....
	Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft.
	WELL'S STATIC WATER LEVEL <u>13</u> ft. below land surface measured on mo/day/yr <u>5-05-83</u>
	Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm
	Est. Yield <u>50</u> gpm: Well water was ..... ft. after ..... hours pumping ..... gpm
	Bore Hole Diameter <u>12</u> in. to <u>50</u> ft., and ..... in. to ..... ft.
	WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
	1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
	2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well <u>Monitoring</u>
	Was a chemical/bacteriological sample submitted to Department? Yes.....No <u>X</u> .....; If yes, mo/day/yr sample was sub-
	mitted Water Well Disinfected? Yes <u>X</u> No

5 TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued <u>X</u> Clamped .....
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below) Welded .....
2 PVC	4 ABS	7 Fiberglass	Threaded .....
Blank casing diameter <u>5</u> in. to <u>0-10</u> ft., Dia <u>5</u> in. to <u>14-27</u> ft., Dia <u>5</u> in. to <u>31-44 &amp; 48-50</u> ft.			
Casing height above land surface <u>36</u> in., weight <u>2,82</u> lbs./ft. Wall thickness or gauge No. <u>258</u>			
TYPE OF SCREEN OR PERFORATION MATERIAL:	7 PVC	10 Asbestos-cement	
1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS
11 Other (specify) .....			12 None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE:	5 Gauzed wrapped	8 Saw cut	11 None (open hole)
1 Continuous slot	3 Mill slot	6 Wire wrapped	9 Drilled holes
2 Louvered shutter	4 Key punched	7 Torch cut	10 Other (specify) .....
SCREEN-PERFORATED INTERVALS:	From <u>10</u> ft. to <u>14</u> ft., From <u>27</u> ft. to <u>31</u> ft.		
	From <u>44</u> ft. to <u>48</u> ft., From ..... ft. to ..... ft.		
GRAVEL PACK INTERVALS:	From <u>10</u> ft. to <u>15</u> ft., From <u>26</u> ft. to <u>32</u> ft.		
	From <u>43</u> ft. to <u>48</u> ft., From ..... ft. to ..... ft.		

6 GROUT MATERIAL:	1 Neat cement	2 Cement grout	3 Bentonite	4 Other .....
Grout Intervals: From <u>0</u> ft. to <u>10</u> ft., From <u>15</u> ft. to <u>26</u> ft., From <u>32</u> ft. to <u>43</u> ft.				
What is the nearest source of possible contamination: <u>&amp; 48-50</u>				
1 Septic tank	4 Lateral lines	7 Pit privy	10 Livestock pens	14 Abandoned water well
2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage	15 Oil well/Gas well
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage	16 Other (specify below)
			13 Insecticide storage	<u>Closed landfill</u>

Direction from well? <u>General Vicinity</u>	How many feet?		
FROM TO LITHOLOGIC LOG	FROM TO LITHOLOGIC LOG		
0 6 Fill			
6 17 Silty Brown Clay			
17 18 Fine Sand			
18 26 Fine Sand, Coarse Sand			
26 31 Clay, Brown			
31 50 Fine Sand, Coarse Sand, Pea Gravel			
50 Limestone			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>5-05-83</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>182</u> This Water Well Record was completed on (mo/day/yr) <u>6-10-83</u> under the business name of <u>Strader Drilling Co., Inc.</u> by (signature) <u>Dale Strader</u>
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INSTRUCTIONS: Use typewriter or ball point pen, PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.