

or 14 1/2 miles South of Manhattan on 1-77 1/4 mi east of Hwy

1 LOCATION OF WATER WELL: County: Geary Fraction: NE 1/4 NW 1/4 SW 1/4 Section Number: 34 Township Number: T 12 S Range Number: R 8 E

Distance and direction from nearest town or city? 7 1/2 miles South on 1-77 from 1-70 1/4 mi east in cedar tree farm Street address of well if located within city?

2 WATER WELL OWNER: Wendell Hoffman Board of Agriculture, Division of Water Resources Application Number:

3R#, St. Address, Box # 500 Sebale Dr. City, State, ZIP Code Manhattan Kans 66502

3 DEPTH OF COMPLETED WELL: 111 ft. Bore Hole Diameter: 10 in. to 14 ft. and 6 1/2 in. to 111 ft.

Well Water to be used as:

1 Domestic	3 Feedlot	6 Oil field water supply	9 Dewatering	11 Injection well	12 Other (Specify below)
2 Irrigation	4 Industrial	7 Lawn and garden only	10 Observation well		

Well's static water level: 5.2 ft. below land surface measured on 15 month 12 day 1980 year

Pump Test Data: Well water was _____ ft. after _____ hours pumping _____ gpm

Est. Yield 10 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

4 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	Casing Joints: Glued <input checked="" type="checkbox"/> Clamped _____
2 PVC	4 ABS	7 Fiberglass		Welded _____
				Threaded _____

Blank casing dia: 5 in. to 111 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.

Casing height above land surface: 16 in. weight _____ lbs./ft. Wall thickness or gauge No. 27.2 Waep

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)	10 Asbestos-cement	11 Other (specify)	12 None used (open hole)
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS			

Screen or Perforation Openings Are:

1 Continuous slot	3 Mill slot	6 Wire wrapped	9 Drilled holes
2 Louvered shutter	4 Key punched	7 Torch cut	10 Other (specify)
			11 None (open hole)

Screen-Perforation Dia: 5 in. to _____ ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.

Screen-Perforated Intervals: From 91 ft. to 51 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.

Gravel Pack Intervals: From 111 ft. to 14 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.

5 GROUT MATERIAL:

1 Neat cement	2 Cement grout	3 Bentonite	4 Other
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Grouted Intervals: From 14 ft. to 4 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.

What is the nearest source of possible contamination: small ditch

1 Septic tank	4 Cess pool	7 Sewage lagoon	10 Fuel storage	14 Abandoned water well
2 Sewer lines	5 Seepage pit	8 Feed yard	11 Fertilizer storage	15 Oil well/Gas well
3 Lateral lines	6 Pit privy	9 Livestock pens	12 Insecticide storage	16 Other (specify below)
			13 Watertight sewer lines	<u>Small Ditch</u>

Direction from well: east How many feet: 50 ? Water Well Disinfected? Yes No _____

Was a chemical/bacteriological sample submitted to Department? Yes _____ No If yes, date sample was submitted _____ month _____ day _____ year: Pump Installed? Yes _____ No

If Yes: Pump Manufacturer's name: NA Model No. _____ HP _____ Volts _____

Depth of Pump Intake _____ ft. Pumps Capacity rated at _____ gal./min.

Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on 12 month 15 day 1980 year

and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 237

This Water Well Record was completed on 12 month 15 day 1980 year under the business name of Strader Drilling Co by (signature) Harold Strader

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM		TO		LITHOLOGIC LOG	
	FROM	TO	FROM	TO	FROM	TO
	0	6			top soil	
	6	36			clay	
	36	45			Rock, Hard lime	
	45	56			Rock, Porous lime soft water	
	56	95			Rock, Blue Hard	
	95	102			Shale, red	
	102	111			Shale, Blue	

ELEVATION: Depth(s) Groundwater Encountered 1.55-60 ft. 2. _____ ft. 3. _____ ft. 4. _____ ft. (Use a second sheet if needed)

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, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.