

Sent to BWS
1-15-79

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 Riley	Fraction SE 1/4 SE 1/4 NW 1/4	Section number 12	Township number T 8 S 6 R 6 E W	Range number
2. Distance and direction from nearest town or city: Street address of well location if in city:		4 S 2.5 E RANDOLPH, KS.		3. Owner of well: Riley Co. UNIVERSITY PARK R.R. or street: Co. Commissioner City, state, zip code: MANHATTAN KS 66502		
4. Locate with "X" in section below: Sketch map:				6. Bore hole dia. 12 in. Completion date _____ Well depth 60 ft. 12-19-78		
				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		
5. Type and color of material				8. Use: <input type="checkbox"/> Domestic <input checked="" 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 PVC Height: Above or below Threaded _____ Welded _____ Surface 24" in. RMP 6 PVC Blue Weight 4.02 lbs./ft. Dia. _____ in. to _____ ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth Gauge No. 316		
				10. Screen: Manufacturer's name _____ Johnson Dorr Type STAINLESS Dia. 6 <input checked="" type="checkbox"/> 10/gauze 0.80 Length 12 Set between 32 ft. and 44 ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/4" x 1/8"		
				11. Static water level: _____ mo./day/yr. 12 ft. below land surface Date 12-19-78		
				12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 60 g.p.m.		
				13. Water sample submitted: _____ mo./day/yr. <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> NO SAMPLE		
				14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter 0 inches above grade		
				15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 5 ft. to 25 ft.		
				16. Nearest source of possible contamination: ft. 60 Direction E Type Lake Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
				17. Pump: _____ Not installed Manufacturer's name Reda Model number RD 35P HP 2 Volts 230 Length of drop pipe 50 ft. capacity 35 g.p.m. Type: <input checked="" 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:		19. Remarks:		20. Water well contractor's certification:		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley		we will install concrete and water tight vault		This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. STRADER Delq Co 182 Business name License No. Address RT 1 Holton, KS Signed Dale Rubin Date 12-19-78 Authorized representative		

T
R
W
E
S
E
S
E
N
W
1
2
1
4
1
4
1
4
1
4

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

Form WWC-5