WATER WELL RECORD    Form WWC-5    KSA 82a-1212

**1 LOCATION OF WATER WELL:**

| | Fraction | | | Section Number | Township Number | Range Number |
|---|---|---|---|---|---|---|
| County: Riley | ¼ NC ¼ NE ¼ | | | 12 | T 8 (S) | R 6 (E)/W |

Distance and direction from nearest town or city street address of well if located within city? From Riley Go 4 Miles East To 77 thin Go 9.5 Road & Go 7/0 OF A Mile East thin Go East 4.7 Miles To Wildwood Dr. thin Go 1.7 Miles To Main Ridge

**2 WATER WELL OWNER:** University Park Water Diss

RR#, St. Address, Box # : Riley Co Public Work 110 Court House Plaza    Will Let You Know    Board of Agriculture, Division of Water Resources

City, State, ZIP Code : Manhatto, KS 66502    Application Number:

**3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:**

```
        N
 --NW--  |  X  --
W        |         E
 --SW--  |  --SE--
        S
```
1 Mile

**4 DEPTH OF COMPLETED WELL.....62'.... ft. ELEVATION:** ...........

Depth(s) Groundwater Encountered 1. 21........ ft. 2. .......ft. 3. .........ft.

WELL'S STATIC WATER LEVEL .... 15.... ft. below land surface measured on mo/day/yr ..........

Pump test data: Well water was ........... ft. after ........... hours pumping ........... gpm

Est. Yield . 36.. gpm: Well water was ........... ft. after ........... hours pumping ........... gpm

Bore Hole Diameter . 11...... in. ~~to be used of~~ ....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 Monitoring well ..........

Was a chemical/bacteriological sample submitted to Department? Yes ✓ No.........; If yes, mo/day/yr sample was submitted    Water Well Disinfected? Yes    No

**5 TYPE OF BLANK CASING USED:**

1 Steel   5 Wrought iron   8 Concrete tile   CASING JOINTS: Glued .... Clamped ....
(2 PVC)   3 RMP (SR)   6 Asbestos-Cement   9 Other (specify below)   Welded (Screwed)
          4 ABS   7 Fiberglass   ..........   Threaded..........

Blank casing diameter ...... 6.....in. to , 20..... ft., Dia ..........in. to .........ft., Dia ..........in. to .........ft.

Casing height above land surface...... 2'.....in., weight Sc 5.40 .......... lbs./ft. Wall thickness or gauge No. ..........

**TYPE OF SCREEN OR PERFORATION MATERIAL:**

1 Steel   3 Stainless steel   5 Fiberglass   (7 PVC)   10 Asbestos-cement
2 Brass   4 Galvanized steel   6 Concrete tile   8 RMP (SR)   11 Other (specify) ..........
                                9 ABS   12 None used (open hole)

**SCREEN OR PERFORATION OPENINGS ARE:**

1 Continuous slot   (3 Mill slot)  31/000ˢ   5 Gauzed wrapped   8 Saw cut   11 None (open hole)
2 Louvered shutter   4 Key punched   6 Wire wrapped   9 Drilled holes
                                7 Torch cut   10 Other (specify) ..........

SCREEN-PERFORATED INTERVALS:   From.... 20........ ft. to .. 60........ft., From ..........ft. to ..........ft.

From ..........ft. to ..........ft., From ..........ft. to ..........ft.

GRAVEL PACK INTERVALS:   From.... 20........ ft. to .. 60........ft., From ..........ft. to ..........ft.

From ..........ft. to ..........ft., From ..........ft. to ..........ft.

**6 GROUT MATERIAL:**   1 Neat cement   2 Cement grout   (3 Bentonite)   4 Other ..........

Grout Intervals:   From.... 0 .....ft. to .. 20....ft., From.. Enviroplug ..ft. to ..........ft., From ..........ft. to ..........ft.

What is the nearest source of possible contamination: None Close   10 Livestock pens   14 Abandoned water well
1 Septic tank   4 Lateral lines   7 Pit privy   11 Fuel storage   15 Oil well/Gas well
2 Sewer lines   5 Cess pool   8 Sewage lagoon   12 Fertilizer storage   16 Other (specify below)
3 Watertight sewer lines   6 Seepage pit   9 Feedyard   13 Insecticide storage   ..........

Direction from well?    How many feet?

| FROM | TO | LITHOLOGIC LOG | FROM | TO | PLUGGING INTERVALS |
|---|---|---|---|---|---|
| 0 | 10 | Brown Clay | | | |
| 10 | 11 | Rock | | | |
| 11 | 21 | Yellow Shale | | | |
| 21 | 28 | Yellow Limestone (Water) | | | |
| 28 | 35 | Yellow Shale | | | |
| 35 | 38 | Rock | | | |
| 38 | 46 | Brown Shale | | | |
| 46 | 48 | Rock | | | |
| 48 | 62 | Brown Shale | | | |

**7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) .. 5/1/89 .. and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. . 451 .. This Water Well Record was completed on (mo/day/yr) . 5/29/89 .. under the business name of Holloman Well Drilling    by (signature) Craig H Cupp

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, Bureau of Water Protection, Topeka, Kansas 66620-7320. Telephone: 913-296-5514. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY   T   R   E/W   SEC.   ¼   ¼   ¼