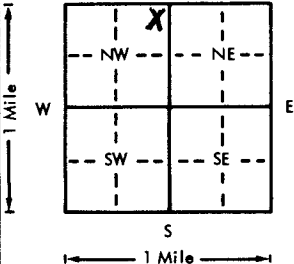


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 CNE 1/4 NE 1/4 NW 1/4 Section number 24 Township number 8 S R Range number 60 W	
2. Distance and direction from nearest town or city: 6-5-2 1/2 E of Randolph, Ks. Street address of well location if in city: _____	
3. Owner of well: T.E. Hinson & Bradley Haller R.R. or street: 4 City, state, zip code: Manhattan Ks. 66502	
4. Locate with "X" in section below: Sketch map: 	
6. Bore hole dia. 8 in. Completion date 6-30-76 Well depth 85 ft.	
7. <input checked="" 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	
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 PLST. Height: Above or below Threaded <input type="checkbox"/> Welded EL. Surface 14 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. 5 in. to 85 ft. depth; Wall Thickness: inches or Dia. _____ in. to _____ ft. depth; gage No. 280	
5. Type and color of material	10. Screen: Manufacturer's name Slot By Driller Type PRC Dia. 5" Slot/gauze 1/6 65 Length 20 Set between 16 65 ft. and 85 ft. Gravel pack? YES Size range of material 1/6 - 1/2
From To	11. Static water level: _____ mo./day/yr. 40 ft. below land surface Date 6-30-76
Top Soil 0 1'	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.
Lime Rock White 1 15	13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____
Clay 15 20	14. Well head completion: <input type="checkbox"/> Pitless adapter _____ inches above grade
" Brown 20 25	<input checked="" type="checkbox"/> Well grouted? YES With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 5 ft. to 15 ft.
" Yellow 25 30	16. Nearest source of possible contamination: ft. 75 Direction S Type Creek Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Lime Rock 30 35	17. Pump: <input checked="" type="checkbox"/> 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
" Gray 35 45	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. Harper Drig. Serv. 176 Business name _____ License No. _____ Address Blue Rapids Ks Signed Edgar H. Harper Date 6-30-76 Authorized representative
Shale Blue 45 50	
" " 50 70	
Lime Stone White & Flint Blue 70 75	
" " " " " " 75 85	
(Use a second sheet if needed)	
18. Elevation: Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks:

T
R
W
E
24
NE
NW
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