

(Copy)

1 LOCATION OF WATER WELL  
 County: **Riley** Fraction **NE 1/4 SW 1/4 NW 1/4** Section Number **1** Township Number **T 9 S** Range Number **R 5 E EW**  
 Distance and direction from nearest town or city? Street address of well if located within city? **Block 7, Walnut St. Riley, Kansas**

2 WATER WELL OWNER: **City of Riley Water Department**  
 RR#, St. Address, Box #: **Riley, Kansas 66531** Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: Application Number:

3 DEPTH OF COMPLETED WELL: **91** ft. Bore Hole Diameter: **14** in. to **91** 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  
 Well's static water level: **30** ft. below land surface measured on **September** month **24** day **1980** year  
 Pump Test Data: Well water was **89** ft. after **1** hours pumping **70** gpm  
 Est. Yield **70** gpm: Well water was ft. after hours pumping gpm

4 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile Casing Joints: Glued  Clamped  
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded  
 2 PVC 4 ABS 7 Fiberglass Threaded  
 Blank casing dia **8** in. to **71** ft. Dia **5.46** in. to lbs./ft. Wall thickness **0.332**  
 Casing height above land surface: **18** in., weight lbs./ft. Wall thickness **0.332**  
 TYPE OF SCREEN OR PERFORATION MATERIAL:  7 PVC 10 Asbestos-cement  
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify)  
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 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-Perforation Dia **8** in. to **91** ft. Dia in. to ft. Dia in. to ft.  
 Screen-Perforated Intervals: From **71** ft. to **91** ft. From ft. to ft.  
 Gravel Pack Intervals: From **20** ft. to **91** ft. From ft. to ft.

5 GROUT MATERIAL: 1 Neat cement  2 Cement grout 3 Bentonite 4 Other  
 Grouted Intervals: From **0** ft. to **20** ft. From ft. to ft. From ft. to ft.  
 What is the nearest source of possible contamination: 10 Fuel storage 14 Abandoned water well  
 1 Septic tank 4 Cess pool 7 Sewage lagoon 11 Fertilizer storage 15 Oil well/Gas well  
 2 Sewer lines 5 Seepage pit 8 Feed yard 12 Insecticide storage 16 Other (specify below)  
 3 Lateral lines 6 Pit privy 9 Livestock pens 13 Watertight sewer lines **drainage ditch**  
 Direction from well **northwest** How many feet **75**? 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 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 **December 10** month **December** day **1980** year  
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **361**  
 This Water Well Record was completed on **January** month **16** day **1981** year under the business name of **Cox - Beswick Irrigation Service, Inc.** by (signature) *Francis Cox*

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
	0	10	Top soil & clay			
	10	20	Layers of lime rock in clay			
	20	28	Clay			
	28	29	Lime rock			
	29	37	Clay			
	37	39	Lime rock			
	39	68	Clay			
	68	87	Layers of lime rock			
	87	93	Light blue clay			
	93	105	Dark blue clay			

ELEVATION: Depth(s) Groundwater Encountered 1. **37** ft. 2. **68** 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.

OFFICE USE ONLY  
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 GEM  
 SEC  
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 NE 1/4 SW 1/4 NW 1/4