

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 NW 1/4 NE 1/4 SW 1/4	Section number 2	Township number T 9 S R 5	Range number 5
2. Distance and direction from nearest town or city: Street address of well location if in city: 1 mile west of RILEY				3. Owner of well: M.W. Rudolph R.R. or street: PR City, state, zip code: Riley, Ks.		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 8 in. Completion date 6-18-77 Well depth 105 ft.		
		<p>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</p> <p>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</p> <p>9. Casing: Material PVC Height: Above or below Threaded <input type="checkbox"/> Welded Blue Surface 20 in. RMP <input type="checkbox"/> PVC Sch 40 Weight 2.56 lbs./ft. Dia. 5 in. to 25 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 1/4</p>		10. Screen: Manufacturer's name PUMPCO Supply Co Type PVC Sch. 40 Dia. 5" Slot/gauze slotted Length 70' Set between 65 ft. and 85 ft. ft. and <input type="checkbox"/> ft. Gravel pack? Yes Size range of material P5A		
				11. Static water level: <input type="checkbox"/> mo./day/yr. 65 ft. below land surface Date 6-18-77		
5. Type and color of material		From	To	12. Pumping level below land surfaces: N/A <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield Back tested 15 g.p.m.		
Top soil		0	6	13. Water sample submitted: <input type="checkbox"/> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>		
Red clays		6	12	14. Well head completion: <input type="checkbox"/> Pitless adapter 20 inches above grade		
Yellow Rock		12	18	15. Well grouted? Yes With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 3 ft. to 10 ft.		
Red Clay		18	29	16. Nearest source of possible contamination: ft. 300 Direction N.E Type TANK Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Yellow Rock		29	33	17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <input type="checkbox"/> Model number <input type="checkbox"/> HP <input type="checkbox"/> Volts <input type="checkbox"/> Length of drop pipe <input type="checkbox"/> ft. capacity <input type="checkbox"/> 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		
TANISH CLAY		33	44	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. Ray Enstley Well Drilling Business name Ray Enstley Well Drilling License No. 202 Address RR #1 Manhattan Ks. 66502 Signed Ray Enstley Date 6/18/77 Authorized representative		
Yellow Rock		44	46	<p>18. Elevation:</p> <p>19. Remarks:</p> <p>Topography: Hill Slope Upland Valley </p>		
Greenish shale		46	54			
Yellow Rock		54	58			
TANISH CLAY		58	69			
Yellowish Rock (water)		69	74			
GRAY ROCK		74	78			
GRAY SHALE		78	84			
GRAY ROCK		84	86			
BLUE SHALE		86	105			
(Use a second sheet if needed)						

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

Form WWC-5

T-9
 R-5
 W-2
 Sec
 1/4 NW NE SW
 1/4 1/4 1/4