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

WATER WELL RECORD
KSA 82a-1201-1215

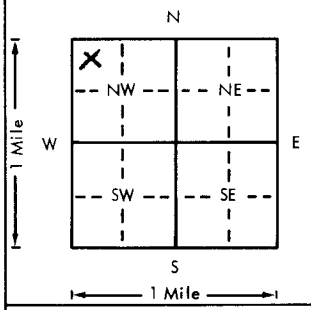
Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:	County	Fraction	Section number	Township number	Range number
	Riley	NW 1/4 NW 1/4 NW 1/4	35	T 9 S	R 6 (E) W

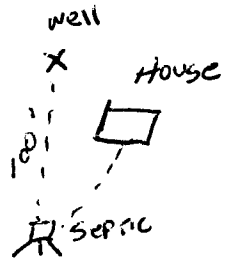
2. Distance and direction from nearest town or city: 1.5 W
Street address of well location if in city: OF KEATS

3. Owner of well: Bob Clack
R.R. or street: RT.1
City, state, zip code: Manhattan, Ks 66502

4. Locate with "X" in section below:



Sketch map:



6. Bore hole dia. 8 in. Completion date 4-11-77
Well depth 100 ft.

7. ___ Cable tool ✓ Rotary ___ Driven ___ Dug
___ Hollow rod ___ Jetted ___ Bored ___ Reverse rotary

8. Use: ✓ Domestic ___ Public supply ___ Industry
___ Irrigation ___ Air conditioning ___ Stock
___ Lawn ___ Oil field water ___ Other

9. Casing: Material PVC Height: Above or below
Threaded ___ Welded PVC Surface 24 in.
RMP ___ PVC PVC Weight 2.58 lbs./ft.
Dia. 5 in. to 100 ft. depth Wall Thickness: inches or
Dia. ___ in. to ___ ft. depth gage No. [redacted].258

5. Type and color of material	From	To
Top soil	0	3
Clay, Brown	3	19
Shale, grey, Limstone, shaley	19	45
Limestone, yellow	45	50
Shale, grey, Red	50	74
Limestone, shaley, grey, Cherty	74	100

(Use a second sheet if needed)

10. Screen: Manufacturer's name Dumpco
Type PVC Dia. 5
Slot/gauze .060 Length 40'
Set between 40 ft. and 60 ft.
80 ft. and 100 ft.
Gravel pack? ✓ Size range of material 1/4 x 1/8

11. Static water level: mo./day/yr.
40 ft. below land surface Date 4-11-77

12. Pumping level below land surfaces:
___ ft. after ___ hrs. pumping ___ g.p.m.
___ ft. after ___ hrs. pumping ___ g.p.m.
Estimated maximum yield 2 g.p.m.

13. Water sample submitted: mo./day/yr.
___ Yes ✓ No Date

14. Well head completion: Cap
___ Pitless adapter 24 Inches above grade

15. Well grouted? ✓
With: ✓ Neat cement ___ Bentonite ___ Concrete
Depth: From 5 ft. to 15 ft.

16. Nearest source of possible contamination:
ft. 100 Direction S Type Septic
Well disinfected upon completion? ✓ Yes ___ No

17. Pump: ✓ Not installed
Manufacturer's name
Model number ___ HP ___ Volts ___
Length of drop pipe ___ ft. capacity ___ g.p.m.
Type:
___ Submersible ___ Turbine
___ Jet ___ Reciprocating
___ Centrifugal ___ Other

18. Elevation:

Topography:
✓ Hill
___ Slope
___ Upland
___ Valley

19. Remarks:
owner will instal slab

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.
Strader Drlg Co Inc. 182
Business name License No.
Address RT1 Holton, Ks
Signed Dave Graham Date 4-11-77
Authorized representative

T 9 R 6 E W Sec 35 1/4 NW 1/4 NW 1/4 NW

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

Form WWC-5

MI-1023