

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

10T #1

1. Location of well:		County Riley	Fraction NW 1/4 NW 1/4 NW 1/4	Section number 36	Township number T 9 S R 6 E/W	Range number
2. Distance and direction from nearest town or city: .3 MW Street address of well location if in city: OF KEATS				3. Owner of well: JACK NEEF R.R. or street: RR 1 City, state, zip code: MANHATTAN, KS		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>8</u> in. Completion date _____ Well depth <u>120</u> ft. <u>7-7-76</u>		
				7. Cable tool <input checked="" 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		
5. Type and color of material				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 <u>PVC</u> Height: <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>24</u> in. RMP <input type="checkbox"/> PVC <u>9L</u> Weight <u>2.58</u> lbs./ft. Dia. <u>5</u> in. to <u>120</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>2.74</u>		
				10. Screen: Manufacturer's name _____ <u>PUMPCO</u> Type <u>PVC</u> Dia. <u>5</u> Slot/gauge <u>.060</u> Length <u>20</u> Set between <u>55</u> ft. and <u>75</u> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>1/4 V 1/8</u>		
				11. Static water level: _____ mo./day/yr. <u>56</u> ft. below land surface Date <u>7-7-76</u>		
				12. Pumping level below land surfaces: <u>AIR TEST</u> _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>7</u> g.p.m.		
				13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
				14. Well head completion: _____ CAP <input type="checkbox"/> Pitless adapter <u>24</u> inches above grade		
				15. Well grouted? <input checked="" type="checkbox"/> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>5</u> ft. to <u>15</u> ft.		
				16. Nearest source of possible contamination: ft. <u>150</u> Direction <u>N/E</u> Type <u>SEPTIC</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
				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		
18. Elevation:		19. Remarks:		20. Water well contractor's certification:		
Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		owner will instal slab		This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. <u>STRADER DRIG. CO., INC 182</u> Business name License No. Address <u>RT 1 MANHATTAN, KS</u> Signed <u>Walter Labrum</u> Date <u>7-12-76</u> Authorized representative		

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 Sec 36
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Forward the white, blue and pink copies to the Department of Health and Environment

Form WWC-5