

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 NE 1/4 NE 1/4 NE 1/4		Section number 30		Township number T 9 S		Range number R 7 W	
2. Distance and direction from nearest town or city: Street address of well location if in city: 2 miles NE of Leato Ks.				3. Owner of well: Preston Gales R.R. or street: RR #1 City, state, zip code: Manhattan, Mo. 66502					
4. Locate with "X" in section below: N W E S 1 Mile 1 Mile				Sketch map:		6. Bore hole dia. 2" in. Completion date 5-21-76 Well depth 132 ft.			
5. Type and color of material				From		To		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					
Top Soil				0		2		9. Casing: Material PVC Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 22 in. RMP <input type="checkbox"/> PVC Sch 40 Weight 2.56 lbs./ft. Dia. 5 in. to 130 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth Gage No. 14	
				2		20		10. Screen: Manufacturer's name Pump-co Supply Type PVC Sch 40 Dia. 5" Slot/gauze Slotted Length 10' Set between 80 ft. and 110 ft. ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Yes Size range of material PEA	
Yellow Rock				20		33		11. Static water level: 80 ft. below land surface Date 5/21/76 mg./day/yr.	
				33		57		12. Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield 4 g.p.m.	
Gray Rock				57		64		13. Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____ mo./day/yr.	
				64		79		14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter 22 Inches above grade	
Yellow Rock (water)				79		99		15. Well grouted? Yes With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 6 ft. to 16 ft.	
				99		82		16. Nearest source of possible contamination: ft. 200 Direction SE Type TANK Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Reddish Clay				82		88		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	
				88		92		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 Emley Well Drilling 202 Business Name _____ License No. _____ Address RR # 4 Manhattan, Mo. Signed Ray Emley Date 5/21/76 Authorized Representative	
Gray Rock				92		101		(Use a second sheet if needed)	
				101		115			
Blue Shale				101		115		18. Elevation:	
				115		120			
Gray Shale				115		120		19. Remarks:	
				120		130			
Gray Rock				120		130		Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	
				130					
Blue Shale				130				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 Emley Well Drilling 202 Business Name _____ License No. _____ Address RR # 4 Manhattan, Mo. Signed Ray Emley Date 5/21/76 Authorized Representative	

T 9 S R 7 W Sec 30 NE NE NE

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

Form WWC-5