

1 LOCATION OF WATER WELL
 County: **Riley** Fraction: **SW 1/4 SW 1/4 SE 1/4** Section Number: **35** Township Number: **T 9 S** Range Number: **R 7 E**

Distance and direction from nearest town or city? **.5 N** Street address of well if located within city? **MANHATTAN P-#3 TATAIRAX HILLS**

2 WATER WELL OWNER: **HABITAT INC.** RR#, St. Address, Box # **5000 Coachmen Rd** Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: **Manhattan, KS 66502** Application Number:

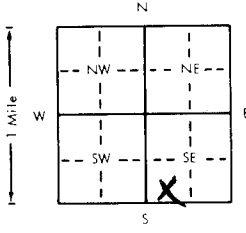
3 DEPTH OF COMPLETED WELL: **180** ft. Bore Hole Diameter: **6** in. to ... ft., and ... in. to ... ft.
 Well Water to be used as:
 1 Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well
 2 Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 7 Lawn and garden only 10 **Observation well**
 Well's static water level: **120** ft. below land surface measured on **11** month **4** day **1980** year
 Pump Test Data: Well water was ... ft. after ... hours pumping ... gpm
 Est. Yield: gpm: Well water was ... ft. after ... hours pumping ... gpm

4 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile Casing Joints: Glued Clamped
 2 **PVC** 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded
 7 Fiberglass Threaded
 Blank casing dia: **1 1/2** in. to **180** ft., Dia ... in. to ... ft., Dia ... in. to ... ft.
 Casing height above land surface: **24** in., weight ... lbs./ft. Wall thickness or gauge No ...
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify)
 12 None used (open hole)
 Screen or Perforation Openings Are:
 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 **Saw cut** 11 None (open hole)
 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes
 7 Torch cut 10 Other (specify)
 Screen-Perforation Dia: **1 1/2** in. to ... ft., Dia ... in. to ... ft., Dia ... in. to ... ft.
 Screen-Perforated Intervals: From **168** ft. to **178** ft., From ... ft. to ... ft., From ... ft. to ... ft.
 From **135** ft. to **140** ft., From ... ft. to ... ft., From ... ft. to ... ft.
 Gravel Pack Intervals: From ... ft. to ... ft., From ... ft. to ... ft., From ... ft. to ... ft.
 From **10** ft. to **180** ft., From ... ft. to ... ft., From ... ft. to ... ft.

5 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other
 Grouted Intervals: From **0** ft. to **10** ft., From ... ft. to ... ft., From ... ft. to ... ft.
 What is the nearest source of possible contamination:
 1 Septic tank 4 Cess pool 7 Sewage lagoon 10 Fuel storage 14 Abandoned water well
 2 Sewer lines 5 Seepage pit 8 Feed yard 11 Fertilizer storage 15 Oil well/Gas well
 3 Lateral lines 6 Pit privy 9 Livestock pens 12 Insecticide storage 16 Other (specify below)
 13 Watertight sewer lines
 Direction from well ... How many feet ... ? 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 **November** month **4** day **1980** year
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **182**
 This Water Well Record was completed on **November** month **18** day **1980** year under the business name of **STRADER DRUG CO, INC.** by (signature) **Dale Asken**

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



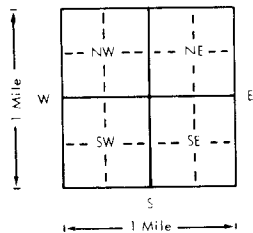
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	4	TOP SOIL	56	62	GREY Shale
4	18	CLAY	62	65	yellow limestone
18	26	Yellow shale	65	69	Grey ..
26	29	Red ..	69	73	Blue Shale
29	30	Grey ..	73	77	Grey shaley limestone
30	32	Yellow Limestone	77	80	" Shale
32	35	shaley yellow ..	80	82	Red ..
35	49	Grey shaley ..	82	109	GREY limestone
49	51	Red Shale	109	110	Black Shale
51	52	Grey ..	110	115	GREY limestone
52	56	Yellow shaley limestone	115	116	" Shale

ELEVATION: ... ft. 1 ... ft. 2 ... 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 T 9 R 7 BW SEC 35 SW 1/4 SE 1/4

LOCATE WELL'S LOCATION WITH "X" IN SECTION BOX: **P-#3**



FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
116	118	Grey limestone	159	164	BLACK SHALE
118	120	" shale	164	165	Grey limestone
120	130	" Limestone	165	170	" shale
130	132	BLACK SHALE	170	180	" shaly limestone
132	135	Grey limestone			
135	138	" shale			
138	139	" limestone			
139	148	" shale			
148	150	Red --			
150	155	Grey --			
155	159	" limestone			

ELEVATION: _____

Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft. 4. ft. (Use a second sheet if needed)

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