

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 <b>RILEY</b>	Fraction <b>NW 1/4 NW 1/4 SE 1/4</b>	Section number <b>36</b>	Township number <b>T 9 S R 7 E W</b>	Range number <b>7</b>
2. Distance and direction from nearest town or city: Street address of well location if in city:			3. Owner of well: R.R. or street: City, state, zip code:			
4. Locate with "X" in section below: Sketch map:			6. Bore hole dia. <u>7</u> in. Completion date <u>9-5-76</u> Well depth <u>135</u> ft.			
			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			
5. Type and color of material			From		To	
Soil			0		8	
Green Clay			8		20	
Red Clay			20		30	
Yellow Rock			30		34	
Yellow Clay			34		46	
Red Clay			46		57	
Yellow Rock			57		62	
Red Clay			62		73	
Yellow Clay			73		89	
Yellow Rock (water)			89		96	
Yellow Clay			96		105	
GRAY Rock			105		110	
Blue GRAY hard lime			110		135	
(Use a second sheet if needed)						
18. Elevation:		19. Remarks:				
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		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. <b>RAY ENSLEY Well Drilling 202A</b> Business name _____ License No. _____ Address <b>RR #4 MANHATTAN, KS</b> Signed <b>Ray Ensley</b> Date <b>9/5/76</b> Authorized representative				

T 9  
 R 7  
 W  
 S 36  
 Sec  
 NW  
 W  
 SE

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

Form WWC-5