WATER WELL RECORD Form WWC-5 KSA 82a-1212

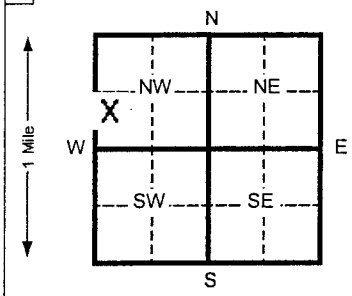
1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Riley	NW ¼ SW ¼ NW ¼	19	T 9 S	R 8 E

Distance and direction from nearest town or city street address of well if located within city?
5800A River Pond Rd. Manhattan, KS

2 WATER WELL OWNER: KS Dept of Wildife & Parks
RR#, St. Address, Box # : 5800A River Pond Rd
City, State, ZIP Code : Manhattan, KS 66502

Board of Agriculture, Division of Water Resources
Application Number:

3 LOCATE WELL'S LOCATON WITH AN "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL 20 ft. ELEVATION: 1027.11

Depth(s) Groundwater Encountered 1.5 15 ft. 2 ____ ft. 3 ____ Ft.

WELL'S STATIC WATER LEVEL 9.02 ft. below land surface measured on mo/day/yr 12/02/15

Pump test data: Well water was ____ Ft. after ____ hours pumping ____ Gpm

Est. Yield ____ Gpm: Well water was ____ Ft. after ____ Hours pumping ____ Gpm

Bore Hole Diameter 8.5 In. to 20 ft. and ____ in. to ____ Ft.

WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 10 Monitoring well MW-7

Was a chemical/bacteriological sample submitted to Department? Yes ____ No X If yes, mo/day/yr sample was Submitted

Water Well Disinfected? Yes ____ No X

5 TYPE OF BLANK CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued ____ Clamped ____
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded ____
2 PVC 4 ABS 7 Fiberglass Threaded X

Blank casing diameter 2 in. to 10 Ft., Dia ____ In. to ____ ft., Dia ____ in. to ____ ft.

Casing height above land surface FLUSH In., weight SCH 40 Lbs./ft. Wall thickness or gauge No. ____

TYPE OF SCREEN OR PERFORATION MATERIAL: 7 PVC 10 Asbestos-cement
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) ____
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) ____

SCREEN-PERFORATED INTERVALS: From 10 ft. to 20 ft. From ____ ft. to ____ ft.
From ____ ft. to ____ ft. From ____ ft. to ____ Ft.

SAND PACK INTERVALS: From 8 ft. to 20 ft. From ____ ft. to ____ Ft.
From ____ ft. to ____ ft. From ____ ft. to ____ Ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other ____

Grout Intervals From2 0.5 ft. to 6 Ft. From3 6 ft. to 8 Ft. From ____ ft. to ____ ft.

What is the nearest source of possible contamination: 10 Livestock pens 14 Abandoned water well
1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/ Gas well
2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage Contaminated Site

Direction from well? How many feet?

FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	0.25		Asphalt (Parking) 3"			
0.25	20		Silty Clay			
20	TD		End of Borehole			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (x) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and w

Completed on (mo/day/yr) 11/24/15 And this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 585 This Water Well Record was completed on (mo/day/yr) 12/18/15

under the business name of Associated Environmental, Inc. By (signature) Bradley J. Johnson

INSTRUCTIONS:. Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY

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