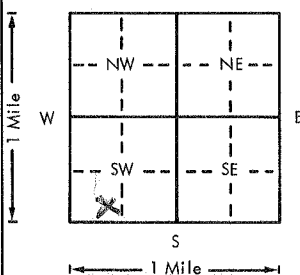


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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>Sedgwick</b>	Fraction <b>SE 1/4 SW 1/4 SW 1/4</b>	Section number <b>24</b>	Township number <b>T 25 S R 1 EA</b>	Range number
2. Distance and direction from nearest town or city <b>5932 East</b>			3. Owner of well: <b>Don Tidemann</b>		
Street address of well location if in city: <b>93rd St. N. &amp; 78'</b>			R.R. or street: <b>Wichita, Kansas</b>		
4. Locate with "X" in section below: Sketch map: 			6. Bore hole dia. <u>14</u> in. Completion date _____ Well depth <u>30</u> ft. <u>5/7/76</u>		
5. Type and color of material			7. <input type="checkbox"/> 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		
			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>Pl.</u> Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <u>SDR26</u> lbs./ft. Dia. <u>6</u> in. to <u>21</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>Class 160</u>		
			10. Screen: Manufacturer's name _____ Type <u>Plastic PVC</u> Dia. <u>6"</u> Slot/gauze <u>1/8</u> Length <u>10'</u> Set between <u>20</u> ft. and <u>30</u> ft. _____ ft. and _____ ft. Gravel pack? <u>yes</u> Size range of material <u>1/8 x 3/8</u>		
			11. Static water level: _____ mo./day/yr. <u>0</u> ft. below land surface Date <u>5/7/76</u>		
			12. Pumping level below land surfaces: <u>Bailed</u> _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>10</u> g.p.m.		
			13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____		
			14. Well head completion: <input type="checkbox"/> Pitless adapter <u>12</u> Inches above grade		
			15. Well grouted? <u>yes</u> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.		
			16. Nearest source of possible contamination: ft. <u>100'</u> Direction <u>North</u> Type <u>Home</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		
			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>Layne Western Co. 102</b> Business name _____ License No. _____ Address <u>Wichita, Kansas</u> Signed <u>[Signature]</u> Date <u>5/11/76</u> Authorized Representative		
18. Elevation:		19. Remarks:			
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley		(Use a second sheet if needed)			

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

Form WWC-5

25  
 10  
 24  
 SE 1/4 SW 1/4  
 1/4 1/4 1/4