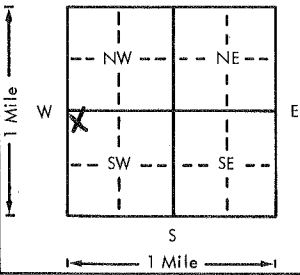


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 Sedgwick	Fraction 1/4 NW 1/4 SW 1/4	Section number 25	Township number T 25 S R 1 E #	Range number 1
2. Distance and direction from nearest town or city: 3 1/2 North of Kechi			3. Owner of well: Joe A. Wilson		
Street address of well location if in city: on Oliver on East Side of the Street			R.R. or street: R. #2		
4. Locate with "X" in section below: Kechi, Kansas			City, state, zip code: Valley Center, Kansas		
4. Locate with "X" in section below: Sketch map: 			6. Bore hole dia. 1 1/2 in. Completion date 12-13-76 Well depth 40 ft.		
5. Type and color of material			7. <input checked="" 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 styrene Height: Above or below 12 in. Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 12 in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. 5 in. to 40 ft. depth Wall Thickness: _____ inches or Dia. _____ in. to _____ ft. depth gage No. .200		
			10. Screen: Manufacturer's name Sunflower Plastic Type styrene Dia. 5" Slot/gauge .06 Length 25' Set between 15 ft. and 40 ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> yes Size range of material 1/4-1/8"		
			11. Static water level: 15 ft. below land surface Date 12-13-76 mo./day/yr.		
			12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.		
			13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input type="checkbox"/> No Date _____		
			14. Well head completion: 12 capped <input type="checkbox"/> Pitless adapter _____ Inches above grade		
			15. Well grouted? <input checked="" type="checkbox"/> yes With: _____ Neat cement _____ Bentonite <input checked="" type="checkbox"/> Concrete Depth: From 0 ft. to 10 ft.		
			16. Nearest source of possible contamination: Septic ft. 150 Direction West Type Tank Well disinfected upon completion? <input checked="" type="checkbox"/> X Yes <input type="checkbox"/> No		
			17. Pump: <input checked="" type="checkbox"/> X 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		
			(Use a second sheet if needed)		
18. Elevation:		19. Remarks: Flat Ground			
Topography: <input type="checkbox"/> Hill <input 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. Harp Well & Pump 236 Business name _____ License No. _____ Address Wichita, Kansas Signed M. Arnold Date 12-16-76 Authorized representative			

T 25 S R 1 E #
 1/4 1/4 1/4 1/4
 NW SW
 Sec

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

Form WWC-5