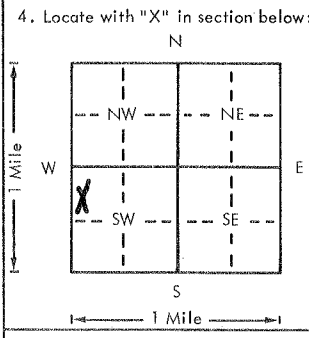


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 <input checked="" type="checkbox"/> SW 1/4 <input checked="" type="checkbox"/> NW 1/4 <input type="checkbox"/> SW 1/4	Section number 29	Township number T 25 S	Range number R 1E <i>W</i>	
2. Distance and direction from nearest town or city: Street address of well location if in city: 8751 North Walnut Valley Center, Kansas			3. Owner of well: John Pritchard R.R. or street: 8751 North Walnut City, state, zip code: Valley Center, Kansas				
4. Locate with "X" in section below: 			Sketch map:			6. Bore hole dia. <u>4</u> in. Completion date <u>2-27-79</u> Well depth <u>65</u> ft.	
5. Type and color of material			From	To	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		
Topsoil			0	3	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		
Clay			3	22	9. Casing: Material <u>styrene</u> Height: Above or below <u>6</u> ft. Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. RMP <input checked="" type="checkbox"/> VC <input type="checkbox"/> Weight _____ lbs./ft. Dia. <u>5</u> in. to <u>6.5</u> ft. depth Wall thickness: inches or <u>0.200</u> Dia. _____ in. to _____ ft. depth Gauge No. _____		
Fine Sand			22	39	10. Screen: Manufacturer's name _____ <u>Sunflower Plastic</u> Type <u>styrene</u> Dia. <u>5"</u> Slot/gauge <u>1/4</u> .06 Length <u>28"</u> Set between <u>37</u> ft. and <u>65</u> ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> Yes Size range of material <u>1/4-1/8"</u>		
Grey Shale			39	65	11. Static water level: _____ mo./day/yr. <u>30</u> ft. below land surface Date <u>2-27-79</u>		
					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 checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
					14. Well head completion: <u>12</u> capped <input type="checkbox"/> Pitless adapter _____ Inches above grade		
					15. Well grouted? <u>yes 1-2 fine sand mix</u> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>40"</u> ft. to <u>14</u> ft.		
					16. Nearest source of possible contamination: <u>NONE</u> ft. _____ Direction _____ Type _____ 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		
			(Use a second sheet if needed)				
18. Elevation:		19. Remarks: Flat Ground				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 <u>Wichita, Kansas</u> Lic <u>67209</u> Address _____ Signed <u>M. Arnold</u> Date <u>3-2-79</u> Authorized representative	
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		No apparent source for contamination.					

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

Form WWC-5