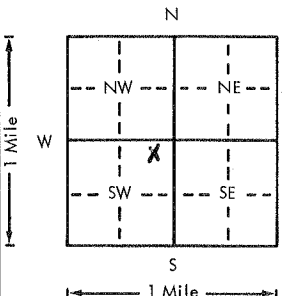


USE TYPEWRITER OR BALL POINT PEN—PRESS FIRMLY, PRINT CLEARLY.

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 NE 1/4 N E 1/4 SW 1/4	Section number 26	Township number T 25 S R 2	Range number E 11
2. Distance and direction from nearest town or city: Street address of well location if in city: 8808 N. 127th St. E. Valley Center, Ks.			3. Owner of well: Kansas Industrial Environment Service, Inc. R.R. or street: 8808 N. 127th St. E. P.O. Box 745 City, state, zip code: Valley Center, Kansas 67226		
4. Locate with "X" in section below: Sketch map: 			6. Bore hole dia. <u>11</u> in. Completion date _____ Well depth <u>30</u> ft. <u>1-5-77</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 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 checked="" type="checkbox"/> Other		
			9. Casing: Material _____ Height: Above or below _____ Threaded _____ Welded _____ Surface <u>18</u> in. RMP _____ PVC <input checked="" type="checkbox"/> Weight <u>2.28</u> lbs./ft. Dia. <u>5</u> in. to <u>30</u> ft. depth Wall Thickness: inches or _____ Dia. _____ in. to _____ ft. depth gage No. <u>.214</u>		
			10. Screen: Manufacturer's name _____ PVC - NSF 160 P.S.I. Type PVC 160PSI Dia. <u>5"</u> Slot/gauge <u>1/16 .06</u> Length <u>10'</u> Set between <u>20</u> ft. and <u>30</u> ft. Gravel pack? <u>yes</u> Size range of material <u>1/2-1/8"</u>		
			11. Static water level: _____ mo./day/yr. <u>N/A</u> ft. below land surface Date _____		
			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: <u>18</u> capped See #1 <input type="checkbox"/> Pitless adapter _____ Inches above grade		
			15. Well grouted? <u>yes</u> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.		
			16. Nearest source of possible contamination: <u>See Map</u> ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input 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: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		19. Remarks: See attached Map #8 Monitor well #14 Well head capped with 5" I.P.S. cap.			
		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 <u>M. Arnold</u> Date <u>1-13-77</u> Authorized representative			

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

Form WWC-5