

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 NW 1/4 NW 1/4 SW 1/4	Section number 26	Township number T 25 S R	Range number 2 E/A
2. Distance and direction from nearest town or city: Street address of well location if in city: 8808 N. 127th St. E. Valley Center, Kansas			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: <div style="text-align: center;"> </div>			6. Bore hole dia. <u>11</u> in. Completion date _____ Well depth <u>45</u> ft. <u>1-5-77</u>		
			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>45</u> ft. depth Wall Thickness _____ inches or Dia. _____ in. to _____ ft. depth gage No. <u>214</u>		
5. Type and color of material			From	To	10. Screen: Manufacturer's name _____ PVC - NSF 160 P.S.I. Type PVC 160PSI Dia. 5" Slot/gauge 1/4" .06 Length 25' Set between 20 ft. and 45 ft. Gravel pack? yes Size range of material 1/4-1/8"
Topsoil			0	2	11. Static water level: _____ mo./day/yr. N/A ft. below land surface Date _____
Clay - yellowish tan, sticky			2	45	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: 18 capped see #1 <input type="checkbox"/> Pitless adapter _____ Inches above grade
					15. Well grouted? yes 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: See Map 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 M. Arnold Date 1-13-77 Authorized representative	

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

Form WWC-5