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

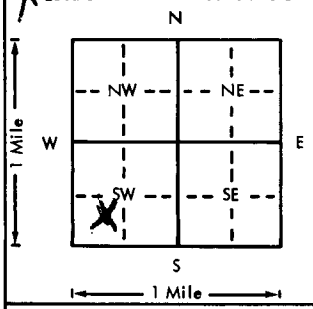
SE SW SE SW

1. Location of well:	County	Fraction	Section number	Township number	Range number
	Sedgwick	~~NE~~ 1/4 ~~SW~~ 1/4 ~~SW~~ 1/4	7	T 26 S	R 1 E W

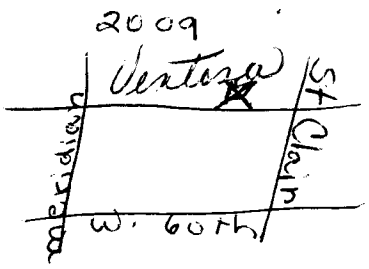
2. Distance and direction from nearest town or city: 2 mi So Valley Center
Street address of well location if in city:

3. Owner of well: Jim Suttle
R.R. or street: 1707 St Clair
City, state, zip code: Wichita, KANS

X Locate with "X" in section below:



Sketch map:



6. Bore hole dia. 8 in. Completion date ~~12/14/78~~
Well depth 26 ft.

7. __ Cable tool ✓ Rotary __ Driven __ Dug
__ Hollow rod __ Jetted __ Bored __ Reverse rotary

8. Use: ✓ Domestic __ Public supply __ Industry
__ Irrigation __ Air conditioning __ Stock
__ Lawn __ Oil field water __ Other

9. Casing: Material Extreme
Threaded ___ Welded ___
RMP ✓ PVC ___
Dia. 4 in. to 26 ft. depth
Dia. ___ in. to ___ ft. depth
Height: Above or below Surface 12 in.
Weight 100 lbs./ft.
Wall Thickness: inches or gage No. 160

10. Screen: Manufacturer's name Sunflower
Type 100 Dia. 4
Slot/gauze Slot Length 26
Set between 21 ft. and 26 ft.
___ ft. and ___ ft.
Gravel pack? Yes Size range of material 1/4 in.

5. Type and color of material	From	To
Fine yellow sand	0	20
1/4 in gravel	20	26

(Use a second sheet if needed)

11. Static water level: mo./day/yr.
12 ft. below land surface Date 12/14/78

12. Pumping level below land surfaces:
___ ft. after ___ hrs. pumping ___ g.p.m.
___ ft. after ___ hrs. pumping ___ g.p.m.
Estimated maximum yield 5 g.p.m.

13. Water sample submitted: mo./day/yr.
__ Yes ✓ No Date

14. Well head completion:
__ Pitless adapter 12 Inches above grade

15. Well grouted? Yes
With: ✓ Neat cement ___ Bentonite ___ Concrete
Depth: From 0 ft. to 10 ft.

16. Nearest source of possible contamination:
ft. 100 Direction WEST Type sewer
Well disinfected upon completion? ___ Yes ___ No

17. Pump: ✓ Not installed
Manufacturer's name
Model number ___ HP ___ Volts ___
Length of drop pipe ___ ft. capacity ___ g.p.m.
Type:
__ Submersible __ Turbine
__ Jet __ Reciprocating
__ Centrifugal __ Other

18. Elevation:

Topography:
__ Hill
__ Slope
__ Upland
✓ Valley

19. Remarks:

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.
Jet Drilling 313
Business name License No.
Address 351 N Salina
Signed Alyce Landers Date 12/14/78
Authorized representative

T 26 R 1 W Sec 7 1/4 1/4 1/4 1/4

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

Form WWC-5

MI-1023