

USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
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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 <b>Sedgwick</b>	Fraction <b>NE 1/4 NE 1/4 SW 1/4</b>	Section number <b>8</b>	Township number <b>T 26 S R 1 E 2W</b>	Range number
2. Distance and direction from nearest town or city: <b>1 1/2 mi West &amp; 3/8 mi North of 61st</b> Street address of well location if in city: <b># Broadway - Wichita</b>			3. Owner of well: R.R. or street: <b>Park City Improv. Dist.</b> City, state, zip code: <b>Park City, Kansas</b>			
4. Locate with "X" in section below: N W E S 1 Mile 1 Mile		Sketch map: <b>Well No. 6 (TH 1-76)</b>		6. Bore hole dia. <b>42</b> in. Completion date Well depth <b>50</b> ft. <b>3-29-77</b>		
5. Type and color of material		From	To	7. Cable tool <input 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 checked="" type="checkbox"/> Reverse rotary		
<b>Soil</b>		<b>0</b>	<b>3</b>	8. Use: <input type="checkbox"/> Domestic <input checked="" 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		
<b>Brown clay</b>		<b>3</b>	<b>14</b>	9. Casing: Material <b>Steel</b> Height: Above <input type="checkbox"/> below <input checked="" type="checkbox"/> Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>36</b> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <b>43.77</b> lbs./ft. Dia. <b>12</b> in. to <b>38</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>330</b>		
<b>Fine sand</b>		<b>14</b>	<b>22</b>	10. Screen: Manufacturer's name <b>Layne</b> Type <b>St. Steel</b> Dia. <b>12"</b> Slot/gauze <b>80</b> Length <b>15'</b> Set between <input type="checkbox"/> ft. and <input type="checkbox"/> ft. <input type="checkbox"/> ft. and <input type="checkbox"/> ft. Gravel pack? <b>yes</b> Size range of material <input type="checkbox"/>		
<b>Med. to coarse sand &amp; gravel</b>		<b>22</b>	<b>45</b>	11. Static water level: <input type="checkbox"/> mo./day/yr. <b>17' 2"</b> below land surface Date <b>3-28-77</b>		
<b>Gray shale</b>		<b>45</b>	<b>50</b>	12. Pumping level below land surfaces: <b>24</b> ft. after <b>B</b> hrs. pumping <b>650</b> g.p.m. <input type="checkbox"/> ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <b>750</b> g.p.m.		
				13. Water sample submitted: <input type="checkbox"/> mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date <input type="checkbox"/>		
				14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <b>24</b> inches above grade		
				15. Well grouted? <b>yes</b> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>20</b> ft.		
				16. Nearest source of possible contamination: <b>Flood</b> ft. <b>100</b> Direction <b>East</b> Type <b>Channel</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
				17. Pump: Manufacturer's name <b>Layne</b> Not installed Model number <b>827268PR</b> HP <b>35</b> Volts <b>460</b> Length of drop pipe <b>30</b> ft. capacity <b>400</b> g.p.m. Type: <input checked="" 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:		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. <b>Layne Western Co. 102</b> Business name <b>Wichita, Kansas</b> License No. Address <b>Wichita, Kansas</b> Signed <b>[Signature]</b> Date <b>3-30-77</b> Authorized representative		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley						

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

Form WWC-5