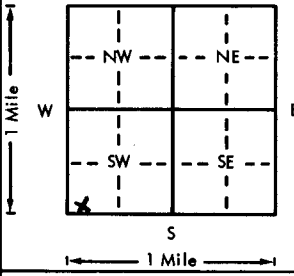


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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 <u>Sedgwick</u>		Fraction <u>NE SW 1/4 SW 1/4 SW 1/4</u>	Section number <u>10</u>	Township number <u>T 26 S</u>	Range number <u>R 1 E</u>	
2. Distance and direction from nearest town or city: Street address of well location if in city: <u>6249 Longmont</u> <u>Wichita, Kansas</u>			3. Owner of well: <u>George Burns</u> R.R. or street: <u>6249 Longmont</u> City, state, zip code: <u>Wichita, Kansas</u>			
4. Locate with "X" in section below: N W E S 1 Mile		Sketch map: 		6. Bore hole dia. <u>7 1/2</u> in. Completion date <u>5-18-76</u> Well depth <u>75</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		
<u>Topsoil</u>		<u>0</u>	<u>3</u>	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 checked="" type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		
<u>Clay</u>		<u>3</u>	<u>12</u>	9. Casing: Material <u>styrofoam</u> Height Above or below Threaded <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <u>12</u> lbs./ft. Dia. <u>5</u> in. to <u>7 1/2</u> ft. depth Wall Thickness: inches or Dia. <u>5</u> in. to <u>7 1/2</u> ft. depth gage No. <u>200</u>		
<u>Fine Sand</u>		<u>12</u>	<u>13</u>	10. Screen: Manufacturer's name <u>Longwell</u> <u>plastic</u> Type <u>styrofoam</u> Dia. <u>5"</u> Slot/gauze <u>100</u> Length <u>50'</u> Set between <u>25</u> ft. and <u>75</u> ft. Gravel pack? <u>yes</u> Size range of material <u>1/4-1/8"</u>		
<u>Shale</u>		<u>13</u>	<u>75</u>	11. Static water level: <u>17</u> ft. below land surface Date <u>5-18-76</u> mo./day/yr.		
				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>12 capped</u> <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>70'</u> to <u>14'</u> ft.		
				16. Nearest source of possible contamination: <u>City</u> ft. <u>50</u> Direction <u>North</u> 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:		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. <u>Harp Well & Pump</u> <u>236</u> Business <u>Wichita, Kansas</u> License No. <u>1/4</u> Address <u>Wichita, Kansas</u> Signed <u>M. Arnold</u> Date <u>6-30-76</u> Authorized representative		
Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley						

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

Form WWC-5