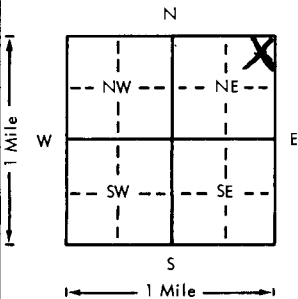


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

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 <b>Sedgwick</b>	Fraction <b>NE 1/4 NE 1/4 NE 1/4</b>	Section number <b>17</b>	Township number <b>T 26 S</b>	Range number <b>R 1 E</b>
2. Distance and direction from nearest town or city: Street address of well location if in city:	<b>2 mi north Wichita</b>		3. Owner of well: <b>Yash Degeri</b> R.R. or street: <b>5901 N Broadway</b> City, state, zip code: <b>Wichita, KS</b>		
4. Locate with "X" in section below: 	Sketch map: <b>61st St</b> <b>5901 N Broadway</b>		6. Bore hole dia. <b>8</b> in. Completion date <b>2/23/79</b> Well depth <b>30</b> 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
<b>Dark Sand</b>			<b>0</b>	<b>5</b>	8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" 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>White Sand</b>			<b>5</b>	<b>30</b>	9. Casing: <b>Styrene</b> Height: <b>Above</b> or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>12</b> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <b>100</b> lbs./ft. Dia. <b>4</b> in. to <b>30</b> ft. depth Wall Thickness: inches or Dia. <b>100</b> in. to <b>30</b> ft. depth gage No. <b>100</b>
					10. Screen: Manufacturer's name <b>Sunflower</b> Type <b>100</b> Dia. <b>4</b> Slot/gauze <b>25</b> Length <b>30</b> Set between <b>25</b> ft. and <b>30</b> ft. ft. and <b>30</b> ft. Gravel pack? <b>no</b> Size range of material
					11. Static water level: <b>19</b> ft. below land surface Date <b>2/23/79</b>
					12. Pumping level below land surfaces: ft. after <b>5</b> hrs. pumping <b>5</b> g.p.m. ft. after <b>5</b> hrs. pumping <b>5</b> g.p.m. Estimated maximum yield <b>5</b> g.p.m.
					13. Water sample submitted: <b>mo./day/yr.</b> <b>Yes</b> <input checked="" type="checkbox"/> <b>No</b> <input type="checkbox"/> Date
					14. Well head completion: <b>Pitless adapter</b> <b>12</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>10</b> ft.
					16. Nearest source of possible contamination: <b>Sealed</b> ft. <b>10</b> Direction <b>SO</b> Type <b>sewer</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
					17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name Model number <b>HP</b> <b>Volts</b> Length of drop pipe <b>ft.</b> capacity <b>g.p.m.</b> 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 checked="" type="checkbox"/> 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. <b>Get Drilling</b> <b>313</b> Business name <b>257 N. Salina</b> License No. Address <b>257 N. Salina</b> Signed <b>W. H. Sander</b> Date <b>3/12/79</b> Authorized representative		

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

Form WWC-5