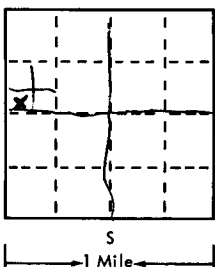


T		R		FW		sec	1/4	1/4	1/4 No.

Kansas State Dept. Of Health  
(Water Well Contractors)  
Forbes-Bldg. 740  
Topeka, Kansas 66620

County <b>Sedgwick</b>		Township name <b>Kechi</b>	Fraction <b>1/4</b>	Section number <b>18</b>	Town number <b>26S</b>	Range number <b>1E</b>
1 Location of well: Distance and direction from nearest town or city: <b>5765 North Sedgwick</b> Street address of well location if in city: <b>Wichita, Kansas</b>		3 Owner of well: <b>Margie Glazier</b> Address: <b>5765 North Sedgwick</b> <b>Wichita, Kansas</b>				
Locate with "X" in section below: 		Sketch map:		4 Well depth: <b>40</b> ft. Date of completion <b>7-</b> Well diameter <b>11</b> in.		
2 Type and color of material		From	To	5 <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		
<b>Sandy Soil</b>		<b>0</b>	<b>2</b>	6 Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Commercial <input type="checkbox"/> Test well <input type="checkbox"/>		
<b>Fine Sand</b>		<b>2</b>	<b>10</b>	7 Casing: Material <b>Styrene</b> Height: above/below _____ Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>12</b> in. Diam. _____ Weight _____ lbs./ft. _____ <b>5</b> in. to <b>40</b> ft. depth Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No _____ in. to _____ ft. depth		
<b>Medium Coarse Sand</b>		<b>10</b>	<b>20</b>	8 Screen: Manufacturer <b>Sunflower Plasti</b> Type <b>Styrene</b> Dia. <b>5"</b> Slot/gauze <b>.005</b> Length <b>10'</b> Set between <b>30</b> ft. and <b>40</b> ft. _____ Fittings: _____ Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <b>1/4 - 1/2"</b>		
<b>Coarse Sand</b>		<b>20</b>	<b>30</b>	9 Static water level: <b>15</b> ft. below land surface Date <b>7-1-75</b>		
<b>Coarse Sand and Fine gravel</b>		<b>30</b>	<b>40</b>	10 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.		
				11 Water sample submitted: <input type="checkbox"/> Yes <input type="checkbox"/> No Date _____		
				12 Well head completion: <b>capped</b> <input type="checkbox"/> Pitless adapter <b>12</b> inches above grade		
				13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Depth: From <b>0</b> ft. to <b>10</b> ft.		
				14 Nearest source of possible contamination: <b>Septic tank</b> ft. <b>80</b> Direction <b>North</b> Type <b>tank</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
				15 Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.m.p. 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		
16 Remarks: elevation <b>Flat Ground</b>		17 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>Harp Well &amp; Pump</b> <b>236</b> Business name <b>Wichita, Kansas</b> License No. <b>672</b> Address <b>Wichita, Kansas</b> Signed <b>D. Arnold</b> Date <b>7-3</b> Authorized representative				