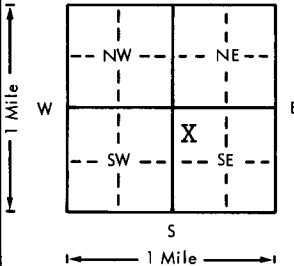


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

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>NW 1/4 NW 1/4 SE 1/4</b>	Section number <b>18</b>	Township number <b>T 26 S</b>	Range number <b>R 1E E/W</b>		
2. Distance and direction from nearest town or city: <b>5736 Legion</b> <b>Wichita, Kansas</b> Street address of well location if in city:				3. Owner of well: <b>Ed Hall</b> R.R. or street: <b>5736 Legion</b> City, state, zip code: <b>Wichita, Kansas</b>				
4. Locate with "X" in section below: 				Sketch map:				
5. Type and color of material				From	To			
				Topsoil		0	3	
				Clay		3	10	
				Fine Sand		10	20	
				Medium Sand with Clay		20	30	
				Fine Sand		30	45	
6. Bore hole dia. <b>11</b> in. Completion date <b>7-15-78</b> Well depth <b>45</b> ft.				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				
8. 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"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other				9. Casing: Material <b>Styrene</b> Height: Above or below <b>12</b> in. Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>12</b> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight <b>12</b> lbs./ft. Dia. <b>5</b> in. to <b>45</b> ft. depth Wall Thickness: inches or Dia. <b>5</b> in. to <b>45</b> ft. depth gauge No. <b>.200</b>				
10. Screen: Manufacturer's name <b>Sunflower Plastic</b> Type <b>styrene</b> Dia. <b>5"</b> Slot/gage <b>.06</b> Length <b>15'</b> Set between <b>30</b> ft. and <b>45</b> ft. Gravel pack? <b>yes</b> Size range of material <b>1/4-1/8"</b>				11. Static water level: <b>15</b> ft. below land surface Date <b>7-15-78</b>				
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: ____ ma./day/yr. <input type="checkbox"/> Yes <input type="checkbox"/> No Date ____				
14. Well head completion: <b>capped</b> <input type="checkbox"/> Pitless adapter <b>12</b> inches above grade				15. Well grouted? <b>yes 1-2 Fine Sand Mix</b> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <b>40"</b> ft. to <b>14</b> ft.				
16. Nearest source of possible contamination: ft. <b>100</b> Direction <b>West</b> Type <b>Septic Tank</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 ____ 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)				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>Harp Well &amp; Pump</b> <b>236</b> Business name License No. Address <b>Wichita, Kansas</b> <b>67209</b> Signed <b>M. Arnold</b> Date <b>7-29-78</b> Authorized representative				
18. Elevation:		19. Remarks: <b>Flat Ground</b>						
Topography: <input 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