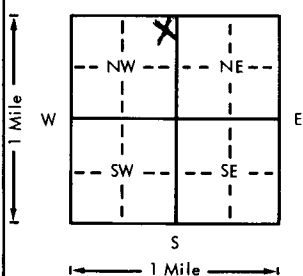


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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 1/4 NE 1/4 NW 1/4</u>	Section number <u>18</u>	Township number <u>T 26</u>	Range number <u>S 1 E</u>	E/W
2. Distance and direction from nearest town or city: Street address of well location if in city: <u>1912 W. 60th N.</u>				3. Owner of well: <u>DWIGHT LAUGHLIN</u> R.R. or street: <u>R12 W. 60th N.</u> City, state, zip code: <u>WICHITA, KS.</u>			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>4</u> in. Completion date <u>4-25-77</u> Well depth <u>28</u> ft.			
				7. Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary			
5. Type and color of material		From		To		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>Topsoil</u>		<u>0</u>		<u>10</u>		9. Casing: Material <u>PVC</u> Height: Above or below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight <u>2.750</u> lbs./ft. Dia. <u>5</u> in. to <u> </u> ft. depth Wall Thickness: inches or Dia. <u> </u> in. to <u> </u> ft. depth gage No. <u>258</u>	
<u>Sand</u>		<u>11</u>		<u>15</u>		10. Screen: Manufacturer's name <u>Madison Pipe Co.</u> Type <u>PVC</u> Dia. <u>5.563</u> Slot/gauze <u>25</u> Length <u>50</u> Set between <u>23</u> ft. and <u>28</u> ft. <u> </u> ft. and <u> </u> ft. Gravel pack? <u>No</u> Size range of material <u> </u>	
<u>Gravel-med.</u>		<u>16</u>		<u>22</u>		11. Static water level: <u>18</u> ft. below land surface Date <u>4-25-77</u>	
<u>Big Gravel</u>		<u>23</u>		<u>28</u>		12. Pumping level below land surfaces: <u>18</u> ft. after <u>1</u> hrs. pumping <u>20</u> g.p.m. <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. Estimated maximum yield <u>50</u> g.p.m.	
						13. Water sample submitted: <u> </u> mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date <u> </u>	
						14. Well head completion: <u> </u> Pitless adapter <u>12</u> inches above grade	
						15. Well grouted? <u>Yes</u> With: <u>Neat cement</u> Bentonite <input type="checkbox"/> Concrete <input type="checkbox"/> Depth: From <u>0</u> ft. to <u>10</u> ft.	
						16. Nearest source of possible contamination: ft. <u>60</u> Direction <u>S</u> Type <u>Sewer</u> Well disinfected upon completion? <u>Yes</u> <input checked="" type="checkbox"/> No <input type="checkbox"/>	
						17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name <u> </u> Model number <u> </u> HP <u> </u> Volts <u> </u> Length of drop pipe <u> </u> ft. capacity <u> </u> 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	
						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>2157 Electric</u> <u>129</u> Business name <u>512 W. 21st / Wichita</u> License No. <u> </u> Address <u> </u> Date <u> </u> Signed <u>J. Harris</u> Authorized representative	
18. Elevation:		19. Remarks:					
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