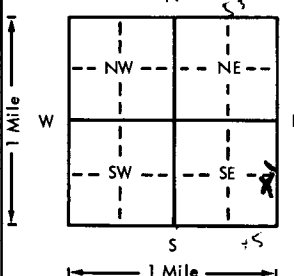


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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 Sedgwick	Section NE 1/4 SE 1/4 SE 1/4	Section number 19	Township number T 26 S R 1E E/W	Range number
2. Distance and direction from nearest town or city: Street address of well location if in city:			3. Owner of well: R.R. or street: City, state, zip code:			
4735 North Sullivan Wichita, Kansas			Walt Stauffer Construction 3535 West 13th Street Wichita, Kansas			
4. Locate with "X" in section below: 			Sketch map:			
5. Type and color of material			From	To	6. Bore hole dia. 11 in. Completion date 8-27-77 Well depth 45 ft.	
Topsoil			0	3	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	
Clay			3	10	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	
Fine Sand			10	25	9. Casing: Material styrene Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface 12 in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <input type="checkbox"/> lbs./ft. Dia. 5 in. to 12 ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. 200	
Medium Sand			25	45	10. Screen: Manufacturer's name Sunflower Plastic Type styrene Dia. 5" Slot/size .06 Length 10' Set between 35 ft. and 45 ft. Gravel pack? yes Size range of material 1/4-1/8"	
					11. Static water level: 15 ft. below land surface Date 8-27-77 mo./day/yr.	
					12. Pumping level below land surfaces: ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <input type="checkbox"/> g.p.m.	
					13. Water sample submitted: <input type="checkbox"/> Yes <input type="checkbox"/> No Date <input type="checkbox"/>	
					14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter 12 inches above grade	
					15. Well grouted? yes 1-2 fine sand mix With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From 40' ft. to 14 ft.	
					16. Nearest source of possible contamination: NONE ft. <input type="checkbox"/> Direction <input type="checkbox"/> Type <input type="checkbox"/> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
					17. Pump: <input type="checkbox"/> Not installed Manufacturer's name Sta-Rite Model number 20P4D02 HP 3/4 Volts 230 Length of drop pipe 30 ft. capacity 20 g.p.m. Type: <input checked="" 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:		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		Septic system not installed when the well was drilled. No apparent source for contamination.		This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. Harp Well & Pump Service, Inc. Business name Wichita, Kansas License No. 236 Address 9-13-77 Signed M. Arnold Date 9-13-77 Authorized representative		

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

Form WWC-5