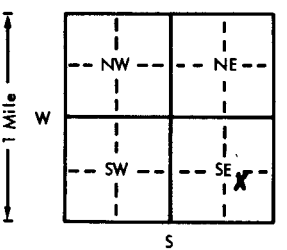


USE TYPEWRITER OR BALL  
POINT PEN—PRESS FIRMLY,  
PRINT CLEARLY.

WATER WELL RECORD  
KSA 82g-1201-1215

Kansas Department of Health and  
Environment-Division of Environment  
(Water well Contractors)  
Topeka, Kansas 66620

SE SW NE SE

1. Location of well: County <u>Sedgwick</u>		Fraction <u>1/4</u> <del>NE</del> <u>SW</u> <u>1/4</u> <u>SW</u> <u>1/4</u>	Section number <u>31</u>	Township number <u>26</u>	Range number <u>1</u> <u>EW</u>
2. Distance and direction from nearest town or city: <u>3227 Cromwell</u>			3. Owner of well: <u>Robert Hays</u>		
Street address of well location if in city: <u>Wichita, Kas</u>			City, state, zip code: <u>Wichita, Kansas</u>		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>4 1/2</u> in. Completion date <u>3-3-76</u>	
				Well depth <u>47</u> 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	
<u>Topsoil</u>		<u>0</u>	<u>2</u>	<input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary	
<u>Fine Sand</u>		<u>2</u>	<u>4</u>	8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry	
<u>Clay</u>		<u>4</u>	<u>10</u>	<input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock	
<u>Fine Sand</u>		<u>10</u>	<u>20</u>	<input checked="" type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	
<u>Coarse Sand</u>		<u>20</u>	<u>35</u>	9. Casing: Material <u>stiprene</u> Height <u>above</u> or below	
<u>medium Sand</u>		<u>35</u>	<u>47</u>	Threaded <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12</u> in.	
				RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight <u>47</u> lbs./ft.	
				Dia. <u>5</u> in. to <u>4 1/2</u> ft. depth Wall Thickness: inches or	
				Dia. <u>5</u> in. to <u>4 1/2</u> ft. depth gage No. <u>1200</u>	
				10. Screen: Manufacturer's name <u>Sunflower Plastic</u>	
				Type <u>stiprene</u> Dia. <u>5 1/2</u>	
				Slot/gauze <u>1.06</u> Length <u>45'</u>	
				Set between <u>32</u> ft. and <u>47</u> ft.	
				Gravel pack? <u>yes</u> size range of material <u>1/4-1/8"</u>	
				11. Static water level: <u>17</u> ft. below land surface Date <u>3-3-76</u>	
				12. Pumping level below land surfaces:	
				<u>      </u> ft. after <u>      </u> hrs. pumping <u>      </u> g.p.m.	
				<u>      </u> ft. after <u>      </u> hrs. pumping <u>      </u> g.p.m.	
				Estimated maximum yield <u>      </u> g.p.m.	
				13. Water sample submitted: <u>      </u> mo./day/yr.	
				<input type="checkbox"/> Yes <input type="checkbox"/> No Date <u>      </u>	
				14. Well head completion: <u>12</u> inches above grade	
				<input type="checkbox"/> Pitless adapter <u>      </u>	
				15. Well grouted? <u>yes</u>	
				With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete	
				Depth: From <u>40'</u> to <u>14'</u> ft.	
				16. Nearest source of possible contamination: <u>sewer</u>	
				ft. <u>30</u> Direction <u>West</u> Type <u>Leak</u>	
				Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
				17. Pump: <u>Not installed</u>	
				Manufacturer's name <u>Sta Rite</u>	
				Model number <u>LP602</u> HP <u>3/4</u> Volts <u>230</u>	
				Length of drop pipe <u>35</u> ft. capacity <u>20</u> 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	
18. Elevation:		19. Remarks: <u>Flat Ground</u>		20. Water well contractor's certification:	
Topography: <u>      </u> Hill <u>      </u> Slope <u>      </u> Upland <u>      </u> Valley				This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.	
				<u>Sharp Well Pump</u> <u>236</u>	
				Business name <u>Wichita, Kansas</u>	
				Address <u>Wichita, Kansas</u>	
				Signed <u>M. Arnold</u> <u>3-23-76</u> Date	
				Authorized representative	

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

Form WWC-5