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

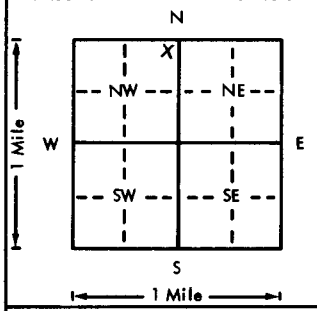
1. Location of well:	County	Fraction	Section number	Township number	Range number
	Sedgwick	~~SW~~ NW NW NE ~~1/4~~ 1/4 1/4	18	T 27 S	R 1 E/W

2. Distance and direction from nearest town or city:

Street address of well location if in city: 1330 Amidon Wichita

3. Owner of well: G.E. Smeeker
R.R. or street: 1330 Amidon
City, state, zip code: Wichita KS 67203

4. Locate with "X" in section below:



Sketch map:

6. Bore hole dia. 11 in. Completion date 4-14-76
Well depth 42 ft.

7. ___ Cable tool ___ Rotary ___ Driven ___ Dug
___ Hollow rod ___ Jetted X Bored ___ Reverse rotary

8. Use: ___ Domestic ___ Public supply ___ Industry
___ Irrigation ___ Air conditioning ___ Stock
X Lawn ___ Oil field water ___ Other

9. Casing: Material ~~PVC~~ Height: (Above) or below
Threaded ___ Welded ___ Surface 12 in.
RMP ___ PVC X Weight ___ lbs./ft.
Dia. 6 in. to 0 ft. depth Wall Thickness: inches or
Dia. 6 in. to 42 ft. depth gage No. ___

5. Type and color of material	From	To
Clay-Sand mix Dark Brown	0	7
Clay " Gray	7	20
Fine Sand " Tan	20	28
Clay Dark Gray	28	28½
Sand Light Brown	28½	30
Medium Gravel " "	30	42
(Use a second sheet if needed)		

10. Screen: Manufacturer's name Sunflower
Type 100 Dia. 6
Slot/gauze 30/16 Length 5
Set between 37 ft. and 42 ft.
___ ft. and ___ ft.
Gravel pack? ___ Size range of material ___

11. Static water level: mo./day/yr.
22'-6 ft. below land surface Date 4-14-76

12. Pumping level below land surfaces:
___ ft. after ___ hrs. pumping ___ g.p.m.
___ ft. after ___ hrs. pumping ___ g.p.m.
Estimated maximum yield 50 g.p.m.

13. Water sample submitted: mo./day/yr.
___ Yes X No Date ___

14. Well head completion:
___ Pitless adapter 12 Inches above grade

15. Well grouted? X
With: ___ Neat cement ___ Bentonite X Concrete
Depth: From 0 ft. to 10 ft.

16. Nearest source of possible contamination: CE
ft. 55 Direction SE Type Sewer
Well disinfected upon completion? ___ Yes X No

17. Pump: ___ Not installed
Manufacturer's name Sears
Model number 390 HP 1/2 Volts 115
Length of drop pipe 40 ft. capacity 800 g.p.m.
Type:
___ Submersible ___ Turbine
X Jet ___ Reciprocating
___ Centrifugal ___ Other

18. Elevation:

Topography:
___ Hill
___ Slope
___ Upland
X Valley

19. Remarks: Lawn & Garden

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.
Brotherson Pump & Well 295
Business name License No.
Address 627 W. 27 So. Wichita KS
Signed G. J. Brotherson Date 4-16-76
Authorized representative

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

Form WWC-5

27 - 1E - 18 Sec NE NW 1/4 1/4 1/4

MI-1023