

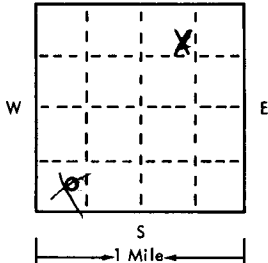
USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT-CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

T R EW sec 1/4 1/4 1/4 No.

Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

SW NE SW NE

1 Location of well:	County Sedgwick	Township name Wichita	Fraction 1/4 1/4	Section number 33	Town number 27	Range number 1-E
Distance and direction from nearest town or city: Street address of well location if in city: 1844 Laura, Wichita, Ks.				3 Owner of well: C.K. Vaughn Address: 2228 Ida, Wichita, Kansas		
Locate with "X" in section below: N  W E S 1 Mile				4 Well depth: 30 ft. Date of completion 4-23-75 Well diameter 11 in.		
2 Type and color of material				5 <input 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		
				6 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"/> Commercial <input type="checkbox"/> Test well <input type="checkbox"/>		
				7 Casing: Material RMP Height: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 11 in. Diam. 5 in. to 30 ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 5 in. to 30 ft. depth		
				8 Screen: Manufacturer J&L Type RMP Dia. 5" Slot/gauze 09375 Length 10' Set between 20 ft. and 30 ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material 3/8		
				9 Static water level: 10 ft. below land surface Date 4-22-75		
				10 Pumping level below land surfaces: 11 ft. after 2 hrs. pumping 56.5 g.p.m. 11 ft. after 1 hrs. pumping 56.5 g.p.m. Estimated maximum yield 75 g.p.m.		
				11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date 4-22-75		
				12 Well head completion: <input type="checkbox"/> Pitless adapter <input type="checkbox"/> Inches above grade		
				13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Depth: From 9 ft. to G.L. ft.		
				14 Nearest source of possible contamination: ft. na Direction _____ Type _____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
				15 Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.m.p. 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)						
16 Remarks: elevation Aprox. GL 1285 For Lawn irrigation, Customer will install cement slab and Pump. Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley				17 Water well contractor's certification: 135A This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. Wilkinson Well Drilling 135 Business name _____ License No. _____ Address 1028 Ida, Wichita, Ks. Signed B.C. Wilkinson Date _____ Authorized representative		

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5