

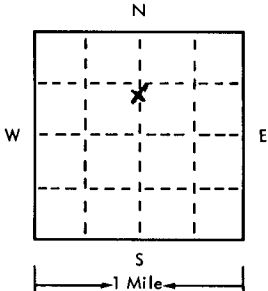
USE TYPEWRITER OR BALL
POINT PEN—PRESS FIRMLY,
PRINT CLEARLY.

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

BILLED: TWENTY FIRST ELECTRIC COMPANY

1 Location of well:	County Sedgwick	Township name Wichita, NE	Fraction SE 1/4 NW 1/4	Section number 6	Town number 27S	Range number 1E
Distance and direction from nearest town or city: 2735 No. Amidon Wichita, Ks.			3 Owner of well: John Bevelhymmer Address: 2735 North Amidon Wichita, Kansas 67203			
Locate with "X" in section below: 			Sketch map:			4 Well depth: 50' ft. Date of completion 6-27-75 Well diameter 11 in.
2 Type and color of material			From	To	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 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 checked="" type="checkbox"/> lawn sprinkling			
			7 Casing: Material styrene Height: above/below 12 in. Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <input type="checkbox"/> Dia. 5 in. to 50 ft. depth Weight 50 lbs./ft. Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No			
			8 Screen: Sunflower Plastic Manufacturer styrene Dia. 5" Type 005 Length 20' Slot/gauze 30 ft. and 50 ft. Set between 30 ft. and 50 ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material 1/2-1/8"			
Sandy Soil			0	5	9 Static water level: 15 ft. below land surface Date 6-27-75	
Fine Sand			5	10	10 Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield ____ g.p.m.	
Medium Coarse Sand			10	30	11 Water sample submitted: <input type="checkbox"/> Yes <input type="checkbox"/> No Date ____	
Coarse Sand			30	50	12 Well head completion: capped <input type="checkbox"/> Pitless adapter 12 1/2 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 0 ft. to 11 ft.	
					14 Nearest source of possible contamination: ft. 75 Direction North Type Sewer 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.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	
16 Remarks: elevation Flat Ground			17 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. Harp Well & Pump 236 Business name Wichita, Kansas License No. 67209 Address m. Arnold Date 6-28-75 Signed m. Arnold Authorized representative			

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

Form WWC-5