

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 <b>SEDOWICK</b>	Fraction <b>SE 1/4 NW 1/4 NE 1/4</b>	Section number <b>6</b>	Township number <b>T 27 S</b>	Range number <b>R 1 E</b>	E/W <b>E/W</b>
2. Distance and direction from nearest town or city: Street address of well location if in city: <b>1629 W. 27th N.</b>				3. Owner of well: <b>L. D. Diamond</b> R.R. or street: <b>1629 W. 27th N.</b> City, state, zip code: <b>WICHITA, KS.</b>			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <b>8</b> in. Completion date <b>6-2-77</b> Well depth <b>40</b> ft.			
				7. 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			
5. Type and color of material		From	To	8. 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"/> Stock <input checked="" type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other			
0-10 Topsoil		0	10	9. Casing: Material <b>Steel</b> Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>12</b> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <b>65</b> lbs./ft. Dia. <b>5</b> in. to <b>40</b> ft. depth Wall Thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. <b>200 MNC</b>			
SAND-FINE		11	30	10. Screen: Manufacturer's name <b>YEL</b> Type <b>200</b> Dia. <b>5"</b> Slot/gauze <b>0.65</b> Length <b>10'</b> Set between <b>30</b> ft. and <b>40</b> ft. ft. and <input type="checkbox"/> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <b>8-30</b>			
GRAVEL-COURSE		31	40	11. Static water level: <input type="checkbox"/> mo./day/yr. <b>15</b> ft. below land surface Date <b>6-2-77</b>			
				12. Pumping level below land surfaces: <b>15</b> ft. after <b>2</b> hrs. pumping <b>20</b> g.p.m. ft. after <input type="checkbox"/> hrs. pumping <input type="checkbox"/> g.p.m. Estimated maximum yield <b>60</b> g.p.m.			
				13. Water sample submitted: <input type="checkbox"/> mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date <input type="checkbox"/>			
				14. Well head completion: <input type="checkbox"/> Pitless adapter <b>12"</b> inches above grade			
				15. Well grouted? <input checked="" type="checkbox"/> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <b>0</b> ft. to <b>10</b> ft.			
				16. Nearest source of possible contamination: ft. <b>50</b> Direction <b>W</b> Type <b>SALVER</b> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
				17. Pump: <input type="checkbox"/> Not installed Manufacturer's name <b>DEMPSEY</b> Model number <b>DA2552</b> HP <b>3/4</b> Volt <b>220</b> Length of drop pipe <b>35</b> ft. capacity <b>20</b> 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:		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. <b>2157 E. Patton</b> <b>129</b> Business name <b>512 W. 21st</b> License No. <b>6-9-77</b> Address <b>7. Hall</b> Date <b>6-9-77</b> Signed <b>Authorized representative</b>			

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

Form WWC-5