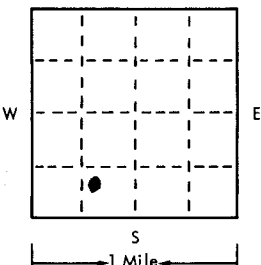


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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

1 Location of well:	County <u>Sedg</u>	Township name <u>Wichita</u>	Fraction <u>SE 1/4 of SW 1/4</u>	Section number <u>15</u>	Town number <u>27</u>	Range number <u>1 E</u>	
Distance and direction from nearest town or city: <u>607 Madison - Wichita Kans</u> Street address of well location if in city: <u>67203</u>				3 Owner of well: <u>Central Congregation of Jehovah's Witnesses</u> Address: <u>607 Madison Wichita Kans 67214</u>			
Locate with "X" in section below: 				Sketch map:			
2 Type and color of material				From	To		
				Clay bore hole		0'	19'
				Drove 1/4 Pipe		19'	25'
				Sand Point		25'	28'
4 Well depth: <u>28'</u> ft. Date of completion <u>4-21</u> Well diameter <u>5</u> in.				5 <input type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input checked="" type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input checked="" type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary			
6 Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Commercial <input type="checkbox"/> Test well <input checked="" type="checkbox"/> <u>Lawn water</u>				7 Casing: Material <u>Steel</u> Height: above/below Threaded <input checked="" type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12</u> in. Diam. <u>5</u> in. to <u>10</u> ft. depth Drive shoe? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <u>1.25</u> in. to <u>35</u> ft. depth			
8 Screen: Manufacturer <u>Johnson</u> Type <u>5 foot</u> Dia. <u>1.25"</u> Slot gauge <u>#10</u> Length <u>36"</u> Set between <u>25</u> ft. and <u>28</u> ft. Fittings: Gravel pack <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Size range of material				9 Static water level: <u>19</u> ft. below land surface Date <u>4-21-75</u>			
				10 Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield <u>15</u> g.p.m.			
				11 Water sample submitted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date ____			
				12 Well head completion: <input type="checkbox"/> Pitless adapter <u>12</u> <input checked="" type="checkbox"/> Inches above grade			
				13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Depth: From <u>0</u> ft. to <u>19</u> ft.			
				14 Nearest source of possible contamination: ft. <u>300</u> Direction <u>North</u> Type <u>Ditch</u> Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No			
				15 Pump: <input type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe <u>26</u> ft. capacity ____ g.p.m. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input checked="" type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other			
16 Remarks: elevation Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley				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. <u>21st Etc. Inc</u> <u>129</u> Business name License No. Address <u>512 W 21st Wichita</u> Signed <u>GE Harris</u> Date <u>4-21</u> Authorized representative 1975			

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

Form WWC-5