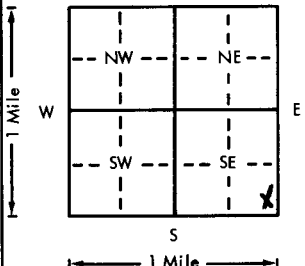


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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 Sedgwick	Fraction SE 1/4 SE 1/4 SE 1/4	Section number 11	Township number T 27 S	Range number R 2 E
2. Distance and direction from nearest town or city: 143rd East and 13th Street North Street address of well location if in city: Wichita, Kansas			3. Owner of well: Mr. Larry Stephenson R.R. or street: 2551 North Belmont City, state, zip code: Wichita, Kansas			
4. Locate with "X" in section below: Sketch map: NW Corner of intersection. #2			6. Bore hole dia. 11 in. Completion date 10-20-76 Well depth 65 ft.			
			7. ☒ Cable tool ☒ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary			
			8. Use: ☒ Domestic ☐ Public supply ☐ Industry ☐ Irrigation ☐ Air conditioning ☐ Stock ☐ Lawn ☐ Oil field water ☐ Other			
5. Type and color of material			From	To	9. Casing: Material styrene Height: Above or below Threaded ☒ Welded ☐ Surface 12 in. RMP ☒ PVC ☐ Weight ☐ lbs./ft. Dia. 5 in. to 65 ft. depth Wall Thickness: inches or Dia. ☐ in. to ☐ ft. depth Gage No. 200	
Topsoil			0	2	10. Screen: Manufacturer's name Sunflower Plastic Type styrene Dia. 5" Slot/gauze .06 Length 20' Set between 45 ft. and 65 ft. Gravel pack? yes Size range of material 1/4-1/8"	
Grey Clay			2	8	11. Static water level: 30 ft. below land surface Date 10-20-76	
Blue Shale			8	50	12. 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.	
Limestone			50	65	13. Water sample submitted: ____ mo./day/yr. Yes ____ No ____ Date ____	
					14. Well head completion: 12 capped ____ Pitless adapter ____ Inches above grade	
					15. Well grouted? yes With: ____ Neat cement ____ Bentonite ☒ Concrete Depth: From 40 ft. to 14 ft.	
					16. Nearest source of possible contamination: NONE ft. ____ Direction ____ Type ____ Well disinfected upon completion? ☒ Yes ____ No	
					17. Pump: ☒ Not installed Manufacturer's name ____ Model number ____ HP ____ Volts ____ Length of drop pipe ____ ft. capacity ____ g.p.m. Type: ____ Submersible ____ Turbine ____ Jet ____ Reciprocating ____ Centrifugal ____ Other	
(Use a second sheet if needed)						
18. Elevation: Topography: ____ Hill ____ Slope ____ Upland ____ Valley		19. Remarks: Open 80 acre field. The well is for test of volume and quality, House to be built in near future. No apparent source for contamination.		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. Harp Well & Pump 236 Business name Wichita, Kansas License No. ____ Address ____ Signed M. Arnold Date 10-29-76 Authorized representative		

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

Form WWC-5