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

WATER WELL RECORD
KSA 82a-1201-1215

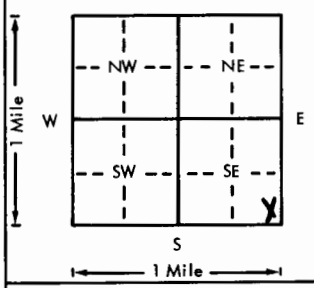
Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:	County	Fraction	Section number	Township number	Range number
	Sedgwick	SE 1/4 SE 1/4 SE 1/4	11	T 27 S	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. #3

6. Bore hole dia. 11 in. Completion date 10-20-76
Well depth 65 ft.

7. ___ Cable tool X Rotary ___ Driven ___ Dug
___ Hollow rod ___ Jetted ___ Bored ___ Reverse rotary

8. Use: X Domestic ___ Public supply ___ Industry
___ Irrigation ___ Air conditioning ___ Stock
___ Lawn ___ Oil field water ___ Other

9. Casing: Material styrene Height: Above or Below
Threaded ___ Welded gl Surface 12 in.
RMP X PVC ___ Weight ___ lbs./ft.
Dia. 5 in. to 65 ft. depth Wall Thickness: inches or
Dia. ___ in. to ___ ft. depth gage No. .200

5. Type and color of material	From	To
Topsoil	0	2
Grey Clay	2	8
Blue Shale	8	50
Limestone	50	65

(Use a second sheet if needed)

10. Screen: Manufacturer's name Sunflower Plastic
Type styrene Dia. 5"
Slot/gauge .06 Length 20'
Set between 45 ft. and 65 ft.
___ ft. and ___ ft.
Gravel pack? yes Size range of material 1/4-1/8"

11. Static water level: mo./day/yr.
30 ft. below land surface Date 10-20-76

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.

13. Water sample submitted: mo./day/yr.
___ Yes ___ No Date ___

14. Well head completion: capped
___ Pitless adapter 12 Inches above grade

15. Well grouted? yes
With: ___ Neat cement ___ Bentonite X Concrete
Depth: From 40" ft. to 14 ft.

16. Nearest source of possible contamination: NONE
ft. ___ Direction ___ Type ___
Well disinfected upon completion? X Yes ___ No

17. Pump: X 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

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 wos drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Business name Harp Well & Pump License No. 236
Address Wichita, Kansas
Signed M. Arnold Authorized representative Date 10-29-76

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

Form WWC-5

M1-1023

27 - 20 W - 11 - SE SE SE
T R Sec 1/4 1/4 1/4