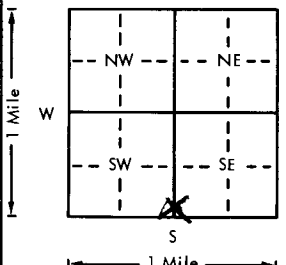


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

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

SW SW SW SE

1. Location of well:		County Sedgwick	Fraction C of SL	Section number 3	Township number T 28	Range number S R 1 E
2. Distance and direction from nearest town or city: Sewage Plant No. 1 City of Wichita Street address of well location if in city: 3100 So. Grove			3. Owner of well: Centric Corporation R.R. or street: Wichita, Kansas City, state, zip code:			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 24 in. Completion date 9/11/78 Well depth 28 ft.		
		Well No. 5		7. ☐ Cable tool ☐ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☒ Reverse rotary		
5. Type and color of material		From		To		8. Use: ☐ Domestic ☐ Public supply ☐ Industry ☐ Irrigation ☐ Air conditioning ☐ Stock ☐ Lawn ☐ Oil field water ☒ Other (dewater)
Fill dirt & rock		0		6		9. Casing: Material steel Height: Above below Threaded ☐ Welded ☒ Surface 12 in. RMP ☐ PVC ☐ Weight 31.75 lbs./ft. Dia. 16 in. to 9 ft. depth Wall thickness: inches or Dia. 16 in. to 9 ft. depth gage No. 1BB
Silty fine sand		6		12		10. Screen: Manufacturer's name Doerr Type steel Dia. 16" Slot/gauze 1/8 Length 20' Set between 8 ft. and 28 ft. Gravel pack? yes Size range of material 1/8 x 1/2
Med. to coarse sand & med. gravel		12		22		11. Static water level: 14 ft. below land surface Date 9/11/78 mo./day/yr.
Blue clay & shale		22		25		12. Pumping level below land surfaces: No test ft. after hrs. pumping g.p.m. ft. after hrs. pumping g.p.m. Estimated maximum yield g.p.m.
Blue shale w/gypsum		25		28		13. Water sample submitted: No mo./day/yr. Yes ☐ No ☒ Date
						14. Well head completion: Pitless adapter 12 inches above grade
						15. Well grouted? ☒ With: ☒ Neat cement ☐ Bentonite ☐ Concrete Depth: From 0 ft. to 7 ft.
						16. Nearest source of possible contamination: sewer ft. 100' Direction South Type Plant 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
18. Elevation:		19. Remarks: Well to be salvaged upon completion of dewatering for new pump station		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. Layne Western Co. 102 Business name Wichita, Kansas License No. _____ Address 1011 North Date 9/11/78 Signed [Signature] Authorized representative		

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

Form WWC-5