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

T R EW sec 1/4 1/4 1/4 No.

WATER WELL RECORD
KSA 82a-1201-1215

Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

1 Location of well: County: Sedgwick | Township name: Riverside | Fraction: NE 1/4 SW 1/4 NE 1/4 | Section number: 8 | Town number: T28S | Range number: R1E

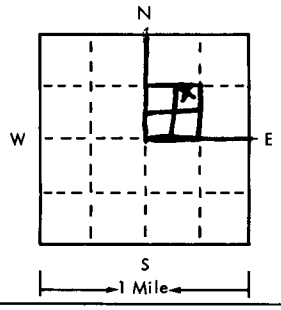
Distance and direction from nearest town or city:

Street address of well location if in city: 341 W 33rd So.

Owner of well: John R Willis

Address: 341 W 33rd So

Locate with "X" in section below:



Sketch map: NE 1/4 of the SW 1/4 of the NE 1/4

4 Well depth: 24 ft. Date of completion 9-6-76
Well diameter 6" in. Borehole

5 ☐ Cable tool ☐ Rotary ☒ Driven ☐ Dug
☐ Hollow rod ☐ Jetted ☒ Bored ☐ Reverse rotary

6 Use: ☒ Domestic ☐ Public supply ☐ Industry
☐ Irrigation ☐ Air conditioning ☐ Commercial
☐ Test well ☐ _____

7 Casing: Material Steel Height: ☐ above ☒ below
Threaded ☒ Welded ☐ Surface 12 in.
Dia. 1¼ in. to 0 ft. depth Weight _____ lbs./ft.
1¼ in. to 24 ft. depth Drive shoe? ☐ Yes ☒ No

2 Type ond color of material	From	To
Dark Brown Clay Soil mix	0"	6'
Light Brown Sand Soil mix	6'	7'
Light Brown Sand	7'	12'
Sandpoint	12'	24'

(use a second sheet if needed)

8 Screen:
Manufacturer Midwest
Type Sandpoint Dia. 1¼" 4"
Slot (gauze) 60 Length _____
Set between 20 ft. and 24 ft.
Fittings:
Gravel pack ☐ Yes ☒ No Size range of material _____

9 Static water level:
12 ft. below land surface Date 9-8-75

10 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.

11 Water sample submitted:
☐ Yes ☒ No Date _____

12 Well head completion:
☐ Pitless adapter 12" ☒ Inches above grade

13 Well grouted? ☒ Yes ☐ No
☒ Neat cement ☐ Bentonite ☐ _____
Depth: From 0 ft. to 10 ft.

14 Nearest source of possible contamination:
ft. 12 Direction East Type Tile
Well disinfected upon completion? ☐ Yes ☐ No

15 Pump: ☒ Not installed
Manufacturer's name _____
Model number _____ HP _____ Volts _____
Length of drop pipe _____ ft. capacity _____ g.m.p.
Type:
☐ Submersible ☐ Turbine
☐ Jet ☐ Reciprocating
☐ Centrifugal ☐ Other

16 Remarks: elevation
Sandpoint Well
Lawn & Garden

Topography:
☐ Hill
☐ Slope
☐ Upland
☒ 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.
Patterson Pump & Well Svc
Business name License No.
Address 827 W. 27 So
Signed _____ Date 9-9-75
Authorized representative

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

Form WWC-5

677-H