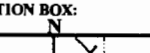


Water Well Record Form WWC-5 KSA 82a-1212												
1	LOCATION OF WATER WELL:			FRACTION			Section Number		Township Number		Range Number	
	Sedgwick			NE 1/4 NW 1/4 NE 1/4			28		T 28 S		R 1E E/W	

Distance and direction from nearest town or city street address of well if located within city?

1201 E. 55th S. Wichita, Kansas

2	WATER WELL OWNER:	CITY OF WICHITA		Board of Agriculture, Division of Water Resource
	RR#, ST. ADDRESS, BOX #:	P.O. Box 9163		
	CITY, STATE, ZIP CODE:	Wichita, Kansas	67277	

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">4 DEPTH OF COMPLETED WELL</td> <td style="width: 50%; text-align: right;">40 ft.</td> </tr> <tr> <td colspan="2">ELEVATION:</td> </tr> <tr> <td>Depth(s) groundwater Encountered</td> <td style="text-align: center;">1 ft. 2 ft. 3 ft.</td> </tr> <tr> <td>WELL'S STATIC WATER LEVEL</td> <td style="text-align: center;">10 FT. BELOW LAND SURFACE MEASURED ON 05/04/1995</td> </tr> <tr> <td>Pump test data:</td> <td>Well water was _____ ft. after _____ hours pumping _____ gpm</td> </tr> <tr> <td>Est. Yield _____ gpm:</td> <td>Well water was _____ ft. after _____ hours pumping _____ gpm</td> </tr> <tr> <td>Bore Hole Diameter 12 in.</td> <td>to 40 ft. and _____ in. to _____ ft.</td> </tr> <tr> <td>WELL WATER TO BE USED AS:</td> <td> 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well </td> </tr> <tr> <td colspan="2"> Was a chemical/bacteriological sample submitted to Department? Yes _____ No X ; If yes, mo/day/yr sample was submitted _____ Water Well Disinfected? Yes Y No _____ </td> </tr> </table>	4 DEPTH OF COMPLETED WELL	40 ft.	ELEVATION:		Depth(s) groundwater Encountered	1 ft. 2 ft. 3 ft.	WELL'S STATIC WATER LEVEL	10 FT. BELOW LAND SURFACE MEASURED ON 05/04/1995	Pump test data:	Well water was _____ ft. after _____ hours pumping _____ gpm	Est. Yield _____ gpm:	Well water was _____ ft. after _____ hours pumping _____ gpm	Bore Hole Diameter 12 in.	to 40 ft. and _____ in. to _____ ft.	WELL WATER TO BE USED AS:	5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well	Was a chemical/bacteriological sample submitted to Department? Yes _____ No X ; If yes, mo/day/yr sample was submitted _____ Water Well Disinfected? Yes Y No _____	
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5 TYPE OF CASING USED:		3 Wrought Iron		8 Concrete tile		CASING JOINTS:		Glued ☒ Clamped	
1 Steel		6 Asbestos-Cement		9 Other (Specify below)				Welded	
2 PVC		7 Fiberglass		SDR-26				Threaded	
4 ABS									
Blank casing Diameter		5 in. to 20 ft., Dia		in. to ft., Dia		in. to ft.			
Casing height above land surface		12 in., weight 2.35		lbs. / ft.		Wall thickness or gauge No.		.214	
TYPE OF SCREEN OR PERFORATION MATERIAL:									
1 Steel		3 Stainless Steel		5 Fiberglass		7 PVC		10 Asbestos-cement	
2 Brass		4 Galvanized steel		6 Concrete tile		8 RMP (SR)		11 other (specify)	
						9 ABS		12 None used (open hole)	
SCREEN OR PERFORATION OPENING ARE:				5 Gauzed wrapped		8 Saw cut		11 None (open hole)	
1 Continous slot		3 Mill slot		6 Wire wrapped		9 Drilled holes			
2 Louvered shutter		4 Key punched		7 Torch cut		10 Other (specify)			
SCREEN-PERFORATION INTERVALS:									
		from 20		ft. to 35		ft., From		ft. to	
				ft. to		ft., From		ft. to	
GRAVEL PACK INTERVALS:		from 20		ft. to 40		ft., From		ft. to	
				ft. to		ft., From		ft. to	

6 GROUT MATERIAL:		1 Neat cement	2 Cement grout	3 Bentonite	4 Other
Grout Intervals: From 0		ft. to 20	ft. From	ft. to	ft. From
What is the nearest source of possible contamination:					
1 Septic tank	4 Lateral lines	7 Pit privy	10 Livestock pens	14 Abandon water well	
2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage	15 Oil well/Gas well	
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage	16 Other (specify below)	
			13 Insecticide storage	None Apparent	

Direction from well? _____ **How many feet?** _____

[illegible]

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 05/04/1995 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 236 This Water Well Record was completed on (mo/day/yr) 05/10/95 Under the business name of Harp Well & Pump Service, Inc by (signature)

Jane Frederick