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

WATER WELL RECORD
KSA 82a-1201-1215

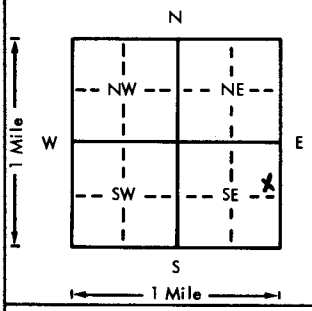
Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Konsas 66620

1. Location of well:	County: Sedgwick	Fraction: 1/4 NE 1/4 SE 1/4	Section number: 1	Township number: T 28 S	Range number: R 2 E/W

2. Distance and direction from nearest town or city: 2916 Pony Meadow
Street address of well location if in city: Wichita, Kansas

3. Owner of well: Laurel Construction
R.R. or street: Box 12107
City, state, zip code: Wichita, Kansas

4. Locate with "X" in section below:



Sketch map:

5. Type and color of material	From	To
Topsoil	0	8
Brown Shale	8	60
Blue Shale	60	80

(Use a second sheet if needed)

6. Bore hole dia. 11 in. Completion date 2-3-76
Well depth 80 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 __ Surface 12 in.
RMP X PVC __ Weight ____ lbs./ft.
Dia. 5 in. to 80 ft. depth Wall Thickness: inches or
Dia. ____ in. to ____ ft. depth gage No. .200

10. Screen: Manufacturer's name Sunflower Plastic
Type Styrene Dia. 5"
(Slot)/gauze .06 Length 40'
Set between 40 ft. and 80 ft.
____ ft. and ____ ft.
Gravel pack? yes Size range of material 1/4 - 1/8"

11. Static water level: mo./day/yr.
33 ft. below land surface Date 2-3-76

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 6 ft. to 16 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

T 28 R 2 E/W Sec 1 1/4 NESE 1/4 1/4

18. Elevation:

Topography:
__ Hill
X Slope
__ Upland
__ Valley

19. Remarks: well to be in the basement. Septic Tank not installed when well was drilled.

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.
Business name Harpswell Pump License No. 236
Address Wichita, Kansas
Signed M. Arnold Date 2-4-76
Authorized representative

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

Form WWC-5

MI-1023