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

WATER WELL RECORD
KSA 82a-1201-1215

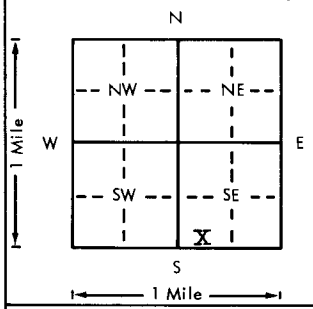
Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:	County	Fraction	Section number	Township number	Range number
	Sedgwick	1/4 SW 1/4 SE 1/4	13	T 28 S	R 2E E/W

2. Distance and direction from nearest town or city: 15320 East 47th
Street address of well location if in city: Wichita, Kansas

3. Owner of well: Terry Milligan
R.R. or street: 643 North Pershing
City, state, zip code: Wichita, Kansas

4. Locate with "X" in section below:



Sketch map:

6. Bore hole dia. 11 in. Completion date 5-11-77
Well depth 110 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 110 ft. depth Wall Thickness: inches or
Dia. ___ in. to ___ ft. depth gage No. .200

5. Type and color of material	From	To
Topsoil	0	3
Clay	3	28
Shale	28	110

(Use a second sheet if needed)

10. Screen: Manufacturer's name Sunflower Plastic
Type Styrene Dia. 5"
Slot/gauze .06 Length 50
Set between 60 ft. and 110 ft.
___ ft. and ___ ft.
Gravel pack? yes Size range of material 1/4-1/8 in.

11. Static water level: 50 ft. below land surface Date 5-11-77 mo./day/yr.

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

18. Elevation:

Topography:
___ Hill
X Slope
___ Upland
___ Valley

19. Remarks: Well is to be in the Basement,
No apparent source for contamination.

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 Harp Well & Pump License No. 236
Address Wichita, Kansas
Signed M. Arnold Authorized representative Date 5-26-77

T 28 R 2 W (E) Sec 13 1/4 1/4 1/4 SW SE

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

Form WWC-5

MI-1023