

USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
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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 <b>Sedgwick</b>	Fraction <b>1/4 NW 1/4 NW 1/4</b>	Section number <b>1</b>	Township number <b>T 29 S R 1E E/W</b>	Range number
2. Distance and direction from nearest town or city: Street address of well location if in city:		3. Owner of well: R.R. or street: City, state, zip code:			
<b>7241 Mahoney Derby, Kansas</b>		<b>Rich Standrich, Inc. P.O. Box 281 Derby, Kansas</b>			
4. Locate with "X" in section below: N W E S 1 Mile 1 Mile		Sketch map: 		6. Bore hole dia. <b>11</b> in. Completion date Well depth <b>65</b> ft. <b>7-21-78</b>	
5. Type and color of material		From	To	7. <input checked="" type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary	
<b>Topsoil</b>		<b>0</b>	<b>3</b>	8. Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	
<b>Clay</b>		<b>3</b>	<b>25</b>	9. Casing: Material <b>styrene</b> Height: Above or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>12</b> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight <b>65</b> lbs./ft. Dia. <b>5</b> in. to <b>65</b> ft. depth Wall Thickness: inches or Dia. <b>5</b> in. to <b>65</b> ft. depth gauge No. <b>.200</b>	
<b>Fine Sand</b>		<b>25</b>	<b>44</b>	10. Screen: Manufacturer's name <b>Sunflower Plastic</b> Type <b>styrene</b> Dia. <b>5"</b> Slot/gauge <b>44</b> <b>06</b> Length <b>25'</b> Set between <b>40</b> ft. and <b>65</b> ft. Gravel pack? <b>yes</b> Size range of material <b>1/4-1/8"</b>	
<b>Brown Shale</b>		<b>44</b>	<b>65</b>	11. Static water level: <b>25</b> ft. below land surface Date <b>7-21-78</b>	
				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: <b>Yes</b> <b>No</b> Date	
				14. <input checked="" type="checkbox"/> Well head completion: <b>12</b> inches above grade <input type="checkbox"/> Pitless adapter	
				15. Well grouted? <b>yes</b> <b>1-2 fine sand mix</b> With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <b>40</b> ft. to <b>14</b> ft.	
				16. Nearest source of possible contamination: <b>Septic</b> ft. <b>55</b> Direction <b>North</b> Type <b>Tank</b> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
				17. Pump: <b>Not installed</b> Manufacturer's name <b>Sta-Rite</b> Model number <b>20P4D02</b> HP <b>3/4</b> Volts <b>230</b> Length of drop pipe <b>40</b> ft. capacity <b>20</b> g.p.m. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other	
				(Use a second sheet if needed)	
18. Elevation: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley	19. Remarks: <b>Flat Ground</b>		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. <b>Harp Well &amp; Pump</b> <b>236</b> Business name License No. Address <b>Wichita, Kansas</b> Signed <b>M. Arnold</b> Date <b>7-27-78</b> Authorized representative		

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

Form WWC-5