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

WATER WELL RECORD
KSA 82a-1201-1215

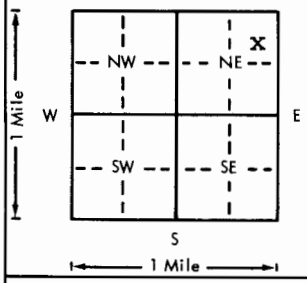
Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:	County	Fraction	Section number	Township number	Range number
	Sedgwick	1/4 NE 1/4 NE 1/4	8	T 29 S	R 1E E/W

2. Distance and direction from nearest town or city: 8025 South Broadway
Street address of well location if in city: Wichita, Kansas

3. Owner of well: William Mainz
R.R. or street: 5059 Vallentine Road
City, state, zip code: Wichita, Kansas

4. Locate with "X" in section below: Sketch map: Well #1



6. Bore hole dia. 11 in. Completion date _____
Well depth 42 ft. 6-2-77

7. __ Cable tool X Rotary __ Driven __ Dug
__ Hollow rod __ Jetted __ Bored __ Reverse rotary

8. Use: __ Domestic __ Public supply __ Industry
__ Irrigation X 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 42 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
Fine Sand	3	20
Medium Sand	20	42

10. Screen: Manufacturer's name Sunflower Plastic
Type Styrene Dia. 5"
Slot/~~Gauze~~ .06 Length 30'
Set between 12 ft. and 42 ft.
_____ ft. and _____ ft.
Gravel pack? yes Size range of material ¼-1/8"

11. Static water level: ma./day/yr.
15 ft. below land surface Date 6-2-77

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 1 to 2 fine sand mix.
With: __ Neat cement __ Bentonite X Concrete
Depth: From 40" ft. to 14 ft.

16. Nearest source of possible contamination: Septic
ft. 250 Direction North Type Tank
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

(Use a second sheet if needed)

18. Elevation:

Topography:
__ Hill
X Slope
__ Upland
__ Valley

19. Remarks:

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.
Harp Well & Pump 236
Business name License No.
Address Wichita, Kansas
Signed M. Arnold Date 8-31-77
Authorized representative

29 T — 1 W R E — 8 Sec — — — 1/4 1/4 1/4

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

Form WWC-5

MT-1023