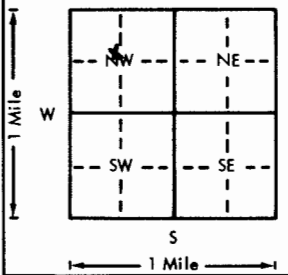


USE TYPEWRITER OR BALL
POINT PEN—PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

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

SW SW NE NW

1. Location of well: County <u>Sedgwick</u>		Fraction <u>1/4 NE 1/4 SW 1/4</u>	Section number <u>11</u>	Township number <u>T 29 S</u>	Range number <u>R 1 E</u>
2. Distance and direction from nearest town or city: <u>8145 Millsap Derby, Kansas</u>		3. Owner of well: <u>Stephen West</u> R.R. or street: <u>2927 South Vine</u> City, state, zip code: <u>Derby, Kansas</u>			
4. Locote with "X" in section below: N W E S 1 Mile Sketch map:		6. Bore hole dia. <u>5</u> in. Completion date <u>1-3-76</u> Well depth <u>35</u> ft.			
		7. ☒ Cable tool ☒ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary			
		8. Use: ☒ Domestic ☐ Public supply ☐ Industry ☐ Irrigation ☐ Air conditioning ☐ Stock ☐ Lawn ☐ Oil field water ☐ Other			
5. Type and color of material		From	To	9. Casing: Material <u>Styrene</u> Height <u>12</u> ft. Threaded ☐ Welded ☒ Surface <u>12</u> in. RMP ☒ PVC ☐ Weight <u>15</u> lbs./ft. Dia. <u>5</u> in. to <u>35</u> ft. depth Wall Thickness: inches or Dia. <u>5</u> in. to <u>35</u> ft. depth Gauge No. <u>1200</u>	
<u>Dirt</u>		<u>0</u>	<u>3</u>	10. Screen: Manufacturer's name <u>Sunflower Plastic</u> Type <u>Styrene</u> Dia. <u>5</u> " Slot/gauze <u>1.06</u> Length <u>15</u> ' Set between <u>20</u> ft. and <u>35</u> ft.	
<u>Clay</u>		<u>3</u>	<u>14</u>	Gravel pack <u>yes</u> R. and <u>14-18</u> " Size range of material <u>14-18</u> "	
<u>Medium Sand</u>		<u>14</u>	<u>26</u>	11. Static water level: <u>15</u> ft. below land surface Date <u>1-3-76</u> mo./day/yr.	
<u>Blue Shale</u>		<u>26</u>	<u>35</u>	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: <u>12</u> Capped ____ Pitless adapter ____ inches above grade	
				15. Well grouted? <u>yes</u> With: ☒ Neat Cement ☐ Bentonite ☒ Concrete Depth: From <u>40'</u> to <u>14</u> ft.	
				16. Nearest source of possible contamination: <u>Septic</u> ft. <u>60</u> Direction <u>SW</u> Type ____ Well disinfected upon completion? ☒ Yes ____ No ____	
				17. Pump: ☒ 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 ☒ 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. <u>Harp Well Pumping</u> License No. <u>235</u> Business name <u>Hospital, Kansas</u> Address <u>M. Arnold</u> Date <u>1-6-76</u> Signed <u>M. Arnold</u> Authorized representative		

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

Form WWC-5