

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 NE NE NW

County: <u>Sedgewick</u>		Fraction: <u>1/4 SE 1/4 NW 1/4</u>		Section number: <u>11</u>		Township number: <u>29</u>		Range number: <u>1</u>		
1. Location of well: <u>Sedgewick</u>					2. Distance and direction from nearest town or city: <u>3802 Haven Dr.</u>					
Street address of well location if in city: <u>Derby, Kans</u>					3. Owner of well: <u>M & H Construction</u>					
					R.R. or street: <u>Box 345</u>					
					City, state, zip code: <u>Derby, Kansas</u>					
4. Locate with "X" in section below:					Sketch map:					
5. Type and color of material					From		To		6. Bore hole dia. <u>11</u> in. Completion date <u>11-20-75</u>	
									Well depth <u>38</u> ft.	
<u>Sandy Topsoil</u> <u>Fine Sand</u> <u>Medium Sand</u> <u>Blue Shale</u>					0		3		7. ☒ Cable tool ☒ Rotary ☐ Driven ☐ Dug	
									☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary	
									8. Use: ☒ Domestic ☐ Public supply ☐ Industry	
									☐ Irrigation ☐ Air conditioning ☐ Stock	
									9. Casing: <u>Styrene</u> Height Above or below	
									Threaded ☐ Welded ☒ Surface <u>12</u> in.	
									RMP ☒ PVC ☐ Weight <u>38</u> lbs./ft.	
									Dia. <u>5</u> in. to <u>38</u> ft. depth Wall Thickness: inches or	
									Dia. <u>5</u> in. to <u>38</u> ft. depth gage No. <u>200</u>	
									10. Screen: Manufacturer's name <u>Sunflower</u>	
									Type <u>Styrene</u> Dia. <u>5"</u>	
									Slot gauze <u>25</u> length <u>13</u>	
									Set between <u>25</u> ft. and <u>38</u> ft.	
									Gravel pack? <u>yes</u> size range of material	
									11. Static water level: <u>20</u> ft. below land surface Date <u>11-20-75</u>	
									mo./day/yr.	
									12. Pumping level below land surfaces:	
									_____ 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>Capped</u>	
									Pitless adapter <u>12</u> 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>None</u>	
									ft. _____ Direction _____ 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	
18. Elevation:					19. Remarks: <u>No apparent source for contamination.</u>				20. Water well contractor's certification:	
Topography: ☒ Hill ☒ Slope _____ Upland _____ Valley									This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.	
									Business name <u>Sharp Well Pump</u> license No. <u>236</u>	
									Address <u>Wichita, Kansas</u>	
									Signed <u>M. Arnold</u> Date <u>11-22-75</u>	
									Authorized representative	

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

Form WWC-5