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

T R EW sec 1/4 1/4 1/4 No.

WATER WELL RECORD
KSA 82a-1201-1215

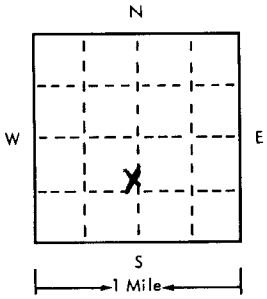
Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

1 Location of well:	County	Township name	Fraction	Section number	Town number	Range number
	Sedgwick	Salem	SE NE¼ SW¼	23	29S	1E

Distance and direction from nearest town or city: 3544 S. 103 Ct.E.
Street address of well location if in city: Wichita, Kansas

3 Owner of well: Don Myers
Address: Box 53 Mulvane, Kansas 67110

Locate with "X" in section below:



Sketch map:

4 Well depth: 42 ft. Date of completion 5-22-75
Well diameter 11 in.

5 ☐ Cable tool ☒ Rotary ☐ Driven ☐ Dug
☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary

6 Use: ☐ Domestic ☐ Public supply ☐ Industry
☒ Irrigation ☐ Air conditioning ☐ Commercial
☐ Test well ☐ yard system

7 Casing: Material styrene Weight: above/below
Threaded ☐ Welded ☐ Surface 12 in.
Diam. 5 in. to 42 ft. depth Weight ___ lbs./ft.
___ in. to ___ ft. depth Drive shoe? ☐ Yes ☐ No

2 Type and color of material	From	To
Dirt and Fine Sandy soil	0	3
Medium sand	3	42

(use a second sheet if needed)

8 Screen:
Manufacturer Sunflower Plastic
Type styrene Dio. 5"
Slot/gauze .005 Length 10'
Set between 32 ft. and 42 ft.
Fittings:
Gravel pack ☐ Yes ☐ No Size range of material ___

9 Static water level:
15 ft. below land surface Date 5-22-75

10 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.

11 Water sample submitted:
☐ Yes ☐ No Date ___

12 Well head completion: capped
☐ Pitless adapter 12 ☒ Inches above grade

13 Well grouted? ☒ Yes ☐ No
☒ Neat cement ☐ Bentonite ☐ ___
Depth: From 0 ft. to 10 ft.

14 Nearest source of possible contamination:
ft. 75 Direction SE Type Septic
Well disinfected upon completion? ☒ Yes ☐ No

15 Pump: ☒ Not installed
Manufacturer's name ___
Model number ___ HP ___ Volts ___
Length of drop pipe ___ ft. capacity ___ g.m.p.
Type:
☐ Submersible ☐ Turbine
☐ Jet ☐ Reciprocating
☐ Centrifugal ☐ Other

16 Remarks: elevation
Flat Ground
irrigating yard only.

Topography:
☐ Hill
☐ Slope
☐ Upland
☐ Valley

17 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 67209
Signed [signature] Date 5-23-75
Authorized representative

Forward the white, blue ond pink copies to the Kansas State Dept. Of Health.

Form WWC-5

677-H