

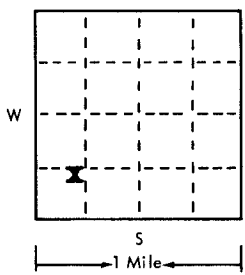
USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

SW SE NW SW

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

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

1 Location of well:	County Sedgwick	Township name Rockford	Fraction SW$\frac{1}{4}$ SW$\frac{1}{4}$	Section number 6	Town number 29S	Range number 2E
Distance and direction from nearest town or city: 942 Morrison Derby, Kansas			3 Owner of well: Bob Clark Address: 942 Morrison Derby, Kansas 67037			
Locate with "X" in section below: 			Sketch map:			4 Well depth: 80 ft. Date of completion 7-17-75 Well diameter 11 in.
2 Type and color of material			From		To	
			0		25	
			25		31	
			31		80	
Top Soil and Clay					5 ☐ Cable tool ☒ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary	
Fine Sand					6 Use: ☒ Domestic ☐ Public supply ☐ Industry ☐ Irrigation ☐ Air conditioning ☐ Commercial ☐ Test well ☐	
Shale					7 Casing: Material styrene Height: above/below Threaded ☐ Welded ☐ Surface 12 in. Diam. 5 in. to 80 ft. depth! Weight 12 lbs./ft. Drive shoe? ☐ Yes ☐ No	
					8 Screen: Sunflower Plastic Manufacturer styrene Dia. 5 " Slot/gauze .005 Length 45 " Set between 35 ft. and 80 ft. Fittings: Gravel pack ☒ Yes ☐ No Size range of material 1-1/8"	
					9 Static water level: 35 ft. below land surface Date 7-17-75	
					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: ☐ Pitless adapter 12 ☒ capped Inches above grade	
					13 Well grouted? ☒ Yes ☐ No ☒ Neat cement ☐ Bentonite ☐ Depth: From 0 ft. to 10 ft.	
					14 Nearest source of possible contamination: City Sewer ft. 50 Direction East Type ____ 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 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. 67209 Address Wichita, Kansas Signed M. Arnold Date 7-18-75 Authorized representative			

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

Form WWC-5