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, Konsas 66620

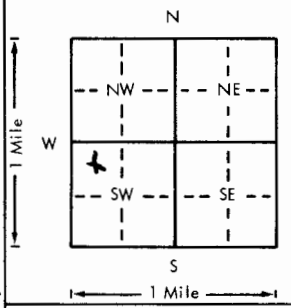
1. Location of well:	County	Fraction	Section number	Township number	Range number
	Sedgwick	1/4 Nw 1/4 SW 1/4	18	T 29 S	R 2E E/W

2. Distance and direction from nearest town or city:

Street address of well location if in city: #11 Madapalla Drive Derby, Kansas

3. Owner of well: Ron C. Vangas
R.R. or street: 461 South Woodlawn
City, state, zip code: Derby, Kansas 67037

4. Locate with "X" in section below:



Sketch map:
Farbough Estates

6. Bore hole dia. 11 in. Completion date
Well depth 80 ft. 2-6-78

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

8. Use: X Domestic __ Public supply __ Industry
__ Irrigation __ 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 80 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
Clay	3	50
Fine Sand and Clay Balls	50	60
Fine sand	60	73
Grey Shale	73	80
(Use a second sheet if needed)		

10. Screen: Manufacturer's name Sunflower Plastic
Type styrene Dia. 5"
Slot/gauze //// .06 Length 15'
Set between 65 ft. and 80 ft.
____ ft. and ____ ft.
Gravel pack? yes Size range of material ¼-1/8"

11. Static water level: 40 ft. below land surface Date 2-6-78 mo./day/yr.

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 1-2 fine sand mix
With: __ Neat cement __ Bentonite X Concrete
Depth: From 6 ft. to 16 ft.

16. Nearest source of possible contamination: NONE
ft. ____ Direction ____ Type ____
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

18. Elevation:

Topography:
X Hill
__ Slope
__ Upland
__ Valley

19. Remarks:
Septic system not installed when the well was drilled.

No apparent source for contamination.

The well will be in the basement.

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
Authorized representative 3-17-78

T 29 R 2 E/W Sec 18 1/4 1/4 1/4 NWSW

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

Form WWC-5

MI-1023