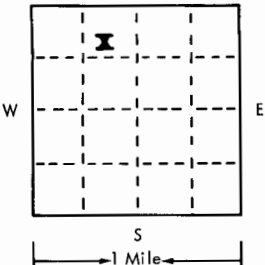


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

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 Butler	Township name Richland	Fraction NE 1/4 NW 1/4	Section number 31	Town number 29S	Range number 3 E
Distance and direction from nearest town or city: 5 mile East of Roack Road on 111th Street South Wichita, Kansas			3 Owner of well: Earl Bradburn Address: 837 Chautauqua Wichita, Kansas			
Locate with "X" in section below: N  S W E 1 Mile			4 Well depth: 80 ft. Date of completion 7-28-75 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 ☐ 7 Casing: Material styrene Height: above/below Threaded ☐ Welded ☐ Surface 12 in. Diam. _____ Weight _____ lbs./ft. _____ 5 in. to 80 ft. depth Drive shoe? ☐ Yes ☐ No _____ in. to _____ ft. depth 8 Screen: Manufacturer Sunflower Plastic Type styrene Dia. 5" Slot/gauze .005 Length 50' Set between 30 ft. and 80 ft. _____ Fittings: Gravel pack ☒ Yes ☐ No Size range of material 1/4-1/8" 9 Static water level: 15 ft. below land surface Date 7-28-75 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 11 ft. 14 Nearest source of possible contamination: ft. 100 Direction South Type Septic tank Well disinfected upon completion? ☒ Yes ☐ No 15 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 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. _____ Address Wichita, Kansas Signed M. Arnold Date 7-29-75 Authorized representative			

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

Form WWC-5