

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

| | | | | | | | | | | | |
|--|--|--|--|---|--|---|--|--|--|--|--|
| 1. Location of well: County SUMNER Sedwick | | Fraction 1/4 SE 1/4 NE 1/4 | | Section number 5 | | Township number T 30 S R | | Range number 1E E/W | | | |
| 2. Distance and direction from nearest town or city: Street address of well location if in city: 12082 Estates Lane Peck, Kansas | | | | 3. Owner of well: Steven Hobbs Construction R.R. or street: 2544 Lulu City, state, zip code: Wichita, Kansas | | | | | | | |
| 4. Locate with "X" in section below: N W E S 1 Mile 1 Mile | | | | Sketch map: | | 6. Bore hole dia. <u>11</u> in. Completion date _____ Well depth <u>45</u> ft. <u>12-16-77</u> | | 7. <input checked="" type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary | | 8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input checked="" type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other | |
| 5. Type and color of material | | | | From | | To | | 9. Casing: Material <u>styrene</u> Height: Above or below _____ Threaded _____ Welded <u>gl</u> Surface _____ <u>12</u> in. RMP <input checked="" type="checkbox"/> PVC _____ Weight _____ lbs./ft. Dia. <u>6</u> in. to <u>45</u> ft. depth Wall Thickness: inches or _____ Dia. _____ in. to _____ ft. depth gage No. <u>200</u> | | | |
| | | | | | | | | 10. Screen: Manufacturer's name _____ Sunflower Plastic Type <u>styrene</u> Dia. <u>6"</u> Slot/gdu/e/ <u>.06</u> Length <u>10'</u> Set between <u>35</u> ft. and <u>45</u> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> yes. Size range of material <u>1/4-1/8</u> | | | |
| Sandy Soil | | | | 0 | | 2 | | 11. Static water level: _____ mo./day/yr. <u>15</u> ft. below land surface Date <u>12-16-77</u> | | | |
| Sandy Clay | | | | 2 | | 15 | | 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. | | | |
| Fine Sand | | | | 15 | | 25 | | 13. Water sample submitted: _____ mo./day/yr. Yes _____ No _____ Date _____ | | | |
| Medium Sand with Clay Streaks | | | | 25 | | 30 | | 14. Well head completion: _____ <input type="checkbox"/> Pitless adapter <u>12</u> <u>capped</u> inches above grade | | | |
| Coarse Sand | | | | 30 | | 45 | | 15. Well grouted? <input checked="" type="checkbox"/> yes <u>1-2 fine sand mix</u> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>40</u> ft. to <u>14</u> ft. | | | |
| | | | | | | | | 16. Nearest source of possible contamination: <u>Septic</u> ft. <u>60</u> Direction <u>East</u> Type <u>Tank</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes _____ No _____ | | | |
| | | | | | | | | 17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.p.m. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other | | | |
| (Use a second sheet if needed) | | | | | | | | | | | |
| 18. Elevation: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley | | 19. Remarks: Flat Ground | | 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 <u>M. Arnold</u> Date <u>1-10-78</u> Authorized representative | | | | | | | |

30-1-C-5 SE NE 1/4 1/4 1/4

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

Form WWC-5