

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 <u>Sedgewick</u> Fraction <u>SW 1/4 SE 1/4 NE 1/4</u> Section number <u>24</u> Township number <u>T 25 S R 1</u> Range number <u>1</u> <u>W</u>																			
2. Distance and direction from nearest town or city: Street address of well location if in city: <u>9933 No Neudian Valley Center</u> City, state, zip code: <u>Wichita KS 67216</u>																			
3. Owner of well: <u>Kensel McNew</u> R.R. or street: <u>2607 Cheyenne</u> City, state, zip code: <u>Wichita KS 67216</u>																			
4. Locate with "X" in section below: Sketch map																			
5. Type and color of material																			
<table border="1"> <thead> <tr> <th></th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td>Top soil</td> <td>0</td> <td>3</td> </tr> <tr> <td>charcoal clay.</td> <td>3</td> <td>31</td> </tr> <tr> <td>fine sand.</td> <td>31</td> <td>34</td> </tr> <tr> <td>brown brickish formation</td> <td>34</td> <td>44</td> </tr> <tr> <td>charcoal shale</td> <td>44</td> <td>77</td> </tr> </tbody> </table>			From	To	Top soil	0	3	charcoal clay.	3	31	fine sand.	31	34	brown brickish formation	34	44	charcoal shale	44	77
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6. Bore hole dia. <u>11</u> in. Completion date <u>10/27/78</u>																			
Well depth <u>77</u> ft.																			
7. ☒ Coble tool ☒ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary																			
8. Use: ☒ Domestic ☐ Public supply ☐ Industry ☐ Irrigation ☐ Air conditioning ☐ Stock ☐ Low ☐ Oil field water ☐ Other																			
9. Casing: Material <u>Reinforced</u> Height <u>0</u> Above or below																			
Threaded ☐ Welded ☒ Surface ☐ RMP ☒ PVC ☐ Weight <u>1.50</u> lbs./ft.																			
Dia. <u>5</u> in. to <u>77</u> ft. depth Wall Thickness: inches or Dia. <u>5</u> in. to <u>77</u> ft. depth Gauge No. <u>1200</u>																			
10. Screen: Manufacturer's name <u>Sunflower</u>																			
Type <u>200</u> Dia. <u>5</u> in. Slot gouge <u>1 1/16</u> Length <u>46</u> ft.																			
Set between <u>37</u> ft. and <u>77</u> ft. Grovel pack <u>yes</u> Size range of material <u>3/8</u>																			
11. Static water level: <u>30</u> ft. below land surface Date <u>10/27/78</u>																			
12. Pumping level below land surfaces: <u>40</u> ft. after <u>12</u> hrs. pumping <u>10</u> g.p.m.																			
<u>40</u> ft. after <u>12</u> hrs. pumping <u>10</u> g.p.m. Estimated maximum yield <u>15-20</u> g.p.m.																			
13. Water sample submitted: <u>Yes</u> ☒ No ☐ Date <u>10/27/78</u>																			
14. Well head completion: <u>12</u> inches above grade																			
<u>Pitless adapter</u>																			
15. Well grouted? <u>yes</u>																			
With: <u>Neat cement</u> ☐ Bentonite ☒ Concrete ☐																			
Depth: From <u>31</u> ft. to <u>131</u> ft.																			
16. Nearest source of possible contamination: <u>15</u> ft. Direction <u>East</u> Type <u>Septic</u>																			
Well disinfected upon completion? ☒ Yes ☐ No																			
17. Pump: ☒ Not installed																			
Manufacturer's name <u>Chloride</u>																			
Model number <u>318</u> HP <u>3</u> Volts <u>115</u>																			
Length of drop pipe <u>77</u> ft. capacity <u>10</u> g.p.m.																			
Type: ☐ Submersible ☐ Turbine ☐ Jet ☐ Reciprocating ☐ Centrifugal ☐ Other																			
18. Elevation: Topography: ☒ Hill ☐ Slope ☐ Upland ☐ Valley																			
19. Remarks: <u>Customer furnish 4'x4'x4' slab around well at grade</u> <u>Per State Regulations</u> <u>Signed X KIMMEL B. McNEW</u>																			
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. <u>318</u> Business name <u>Chloride</u> License No. <u>10/27/78</u> Address <u>Chloride</u> Signed <u>Chloride</u> Date <u>10/27/78</u> Authorized representative																			

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

Form WWC-5