

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 SEDGWICK	Fraction 1/4 SE 1/4 SE 1/4	Section number 5	Township number T 25 S R 2W E/W	Range number
2. Distance and direction from nearest town or city: Street address of well location if in city:		1 mile N. of Bentley, Ks. and 2 1/4 W, then 1/4 N.		3. Owner of well: R.R. or street: City, state, zip code:		
4. Locate with "X" in section below: N 1 Mile W E S 1 Mile		Sketch map: Bentley, Kansas		6. Bore hole dia. 11 in. Completion date _____ Well depth 50 ft. 7-21-78		
5. Type and color of material		From	To	7. ☐ Cable tool ☒ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary		
Sandy Topsoil		0	3	8. Use: ☐ Domestic ☐ Public supply ☐ Industry ☒ Irrigation ☐ Air conditioning ☐ Stock ☐ Lawn ☐ Oil field water ☐ Other		
Brown Clay		3	8	9. Casing: Material 6" Height: Above or below Threaded ☐ Welded ☐ Surface 12 in. RMP ☐ PVC ☒ Weight 3.96 lbs./ft. Dia. 6 in. to 50 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. .316		
Fine Sand		8	25	10. Screen: Manufacturer's name PVC NSF Approved 200 PSI Type PVC 200 PSI Dia. 6" Slot/size .06 Length 20' Set between 30 ft. and 50 ft. _____ ft. and _____ ft.		
Coarse Sand		25	48	11. Static water level: _____ mo./day/yr. 12 ft. below land surface Date 7-21-78		
Brown Clay		48	50	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 ☒ Concrete Depth: From 0 ft. to 10 ft.		
				16. Nearest source of possible contamination: ft. _____ Direction _____ Type NONE Well disinfected upon completion? ☒ Yes ☐ No		
				17. 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		
				(Use a second sheet if needed)		
18. Elevation: Topography: ☐ Hill ☐ Slope ☐ Upland ☐ Valley	19. Remarks: Flat Ground No apparent source for contamination.		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 67209 Signed Mr. Arnold Date 9-16-78 Authorized representative			

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

Form WWC-5