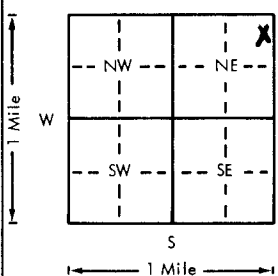


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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 NE 1/4 NE 1/4	Section number 18	Township number T 26 S R 1W E/W
2. Distance and direction from nearest town or city: Street address of well location if in city:		3. Owner of well: Jim Henry 2406 Manhattan Wichita, Kansas City, state, zip code:			
4. Locate with "X" in section below: N 1 Mile W E S 1 Mile		Sketch map: 		6. Bore hole dia. 14 in. Completion date 12-13-77 Well depth 27 ft.	
5. Type and color of material		From	To	7. ☒ Cable tool ☒ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary	
Topsoil		0	3	8. Use: ☒ Domestic ☐ Public supply ☐ Industry ☐ Irrigation ☐ Air conditioning ☐ Stock ☐ Lawn ☐ Oil field water ☐ Other	
Clay		3	6	9. Casing: Material styrene Height: Above or below Threaded ☐ Welded ☒ Surface 12 in. RMP ☒ PVC ☐ Weight ☐ lbs./ft. Dia. 5 in. to 27 ft. depth Wall Thickness: inches or Dia. ☐ in. to ☐ ft. depth gage No. 200	
Fine Sand		6	15	10. Screen: Manufacturer's name Sunflower Plastic Type styrene Dia. 5" Slot/gap 1/16 Length 10' Set between 17 ft. and 27 ft. Gravel pack? ☒ Size range of material 1/4-1/8"	
Medium Sand		15	27	11. Static water level: 14 ft. below land surface Date 12-13-77 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: 12 capped ____ Pitless adapter ____ Inches above grade	
				15. Well grouted? yes 1-2 fine sand mix With: ____ Neat cement ____ Bentonite ____ Concrete Depth: From 40" ft. to 14 ft.	
				16. Nearest source of possible contamination: NONE ft. ____ Direction ____ Type ____ 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 Septic System not installed at this time No apparent source for contamination. Pump not installed by our company.			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 12-31-77 Authorized representative	

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

Form WWC-5