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

T	R	EW	sec	1/4	1/4	1/4	No.

WATER WELL RECORD
KSA 82a-1201-1215

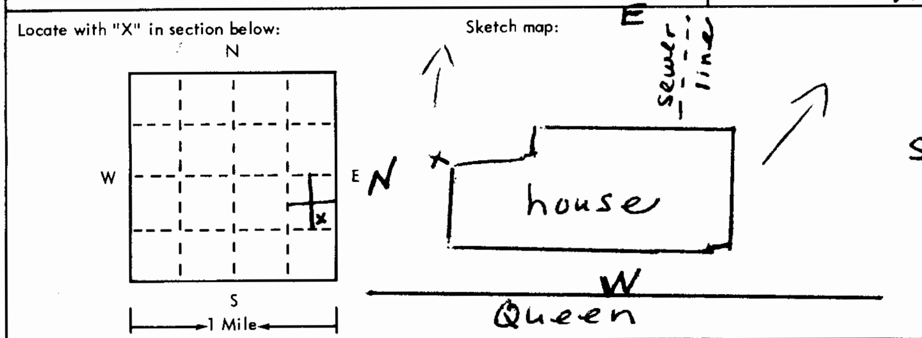
Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

1 Location of well:	County	Township name	Fraction	Section number	Town number	Range number
	Sedgwick	Park	SE, NE, SE	19	T-26-S	R1W

Distance and direction from nearest town or city:
Street address of well location if in city: SAME

3 Owner of well: Willya M. Copenhaver
Address: 546 Queen
Maize, Kans. 67101

Locate with "X" in section below: Sketch map:



4 Well depth: 35 ft. Date of completion 5-2-76
Well diameter 10 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 RMP Height: above/below
Threaded ☐ Welded ☐ Glued Surface 13 in.
Diam. Weight 0.200 lbs./ft.
6 in. to 25 ft. depth Drive shoe? ☐ Yes ☒ No
___ in. to ___ ft. depth

2 Type and color of material	From	To
brown dirt	0	2
red clay	2	20
fine red sand	20	22
medium red sand	22	30
corse sand	30	35
(use a second sheet if needed)		

8 Screen:
Manufacturer Sunflower
Type RMP Dia. 6
Slot/gauze .075 Length 2"
Set between 25 ft. and 35 ft.
Fittings:
Gravel pack ☐ Yes ☒ No Size range of material ___

9 Static water level:
12 ft. below land surface Date 4-29-76

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: 13
☐ Pitless adapter ☒ Inches above grade

13 Well grouted? ☒ Yes ☐ No
☒ Neat cement ☐ Bentonite ☐ ___
Depth: From 0 ft. to 10 ft.

14 Nearest source of possible contamination:
ft. 25 Direction S Type sewer line
Well disinfected upon completion? ☒ Yes ☐ No

15 Pump: ☒ Not installed
Manufacturer's name ___
Model number ___ HP ___ Volts ___
Length of drop pipe ___ ft. capacity ___ g.m.p.
Type:
☐ Submersible ☐ Turbine
☐ Jet ☐ Reciprocating
☐ Certrifugal ☐ 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.
Whitchurch Well Service 309
Business name License No.
Address 520 James, Maize
Signed [signature] Date 5-2-76
Authorized representative

26 1W 19 SE NE SE

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

Form WWC-5

677-H