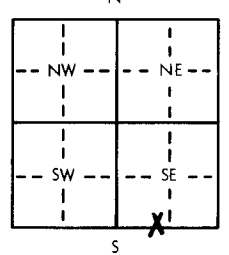


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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 SE 1/4 SW 1/4 SE 1/4	Section number 19	Township number T 26 S R 1W E/W	Range number
2. Distance and direction from nearest town or city: Street address of well location if in city: 610 James Maize, Kansas			3. Owner of well: Don Sones Construction R.R. or street: 541 Trotter City, state, zip code: Maize, Kansas			
4. Locate with "X" in section below: N 1 Mile W 1 Mile E S 			Sketch map:		6. Bore hole dia. 11 in. Completion date _____ Well depth 45 ft. 10-30-78	
5. Type and color of material			From To		7. ☐ Cable tool ☒ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary	
					8. Use: ☒ Domestic ☐ Public supply ☐ Industry ☐ Irrigation ☐ Air conditioning ☐ Stock ☐ Lawn ☐ Oil field water ☐ Other	
					9. Casing: Material Styrene Height: Above or below _____ Threaded _____ Welded gl Surface 12 in. RMP ☒ PVC _____ Weight _____ lbs./ft. Dia. 5 in. to 45 ft. depth Wall Thickness: inches or _____ Dia. _____ in. to _____ ft. depth gage No. 200	
					10. Screen: Manufacturer's name _____ Sunflower plastic Type styrene Dia. 5" Slot/gauge 06 Length 20' Set between 25 ft. and 45 ft. _____ ft. and _____ ft. Gravel pack? yes Size range of material 1-1/8"	
					11. Static water level: _____ mo./day/yr. 16 ft. below land surface Date 10-30-78	
(Use a second sheet if needed)					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 6 ft. to 16 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	
					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 M. Arnold Date 11-30-78 Authorized representative	
					18. Elevation:	
					19. Remarks: Flat ground Septic system not installed at this time No apparent source for contamination Well is to be in the basement.	
					Topography: ☐ Hill ☐ Slope ☐ Upland ☐ Valley	

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

Form WWC-5