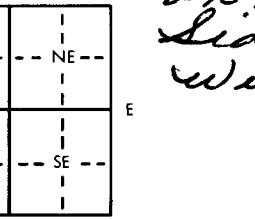


USE TYPEWRITER OR BALL
POINT PEN—PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82g-1201-1215

Kansas Department of Health and
Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well: Sedgwick County		Fraction: NW 1/4 NW 1/4 SW 1/4		Section number: 22		Township number: 26S		Range number: 1R	
2. Distance and direction from nearest town or city: SE corner of Hedge Road & 48th St. No.				3. Owner of well: Pick Broadway R.R. or street: 6726 Ohio City, state, zip code: Wichita, Kansas					
4. Locate with "X" in section below:  Sketch map: on the South Side Wichita, Kansas				6. Bore hole dia. 1 1/2 in. Completion date: 6-11-76 Well depth: 38 ft.					
5. Type and color of material				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: 12 in. Threaded ☐ Welded ☒ Surface ☐ RMP ☒ PVC ☐ Weight: 5 lbs./ft. Dia. 5 in. to 38 ft. depth Wall Thickness: inches or Dia. 5 in. to 38 ft. depth Gauge No. 1200					
				10. Screen: Manufacturer's name: SUNFLOWER PLASTIC Type: STYRENE Dia. 5 in. Slot gauze: 20 Length: 10 ft. Set between 28 ft. and 38 ft. Gravel pack? YES Size range of material: 1/4 - 1/8 in.					
				11. Static water level: 15 ft. below land surface Date: 6-11-76 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 With: ____ Neat cement ____ Bentonite ☒ Concrete Depth: From 40 ft. to 14 ft.					
				16. Nearest source of possible contamination: 60 ft. SE Direction Septic Tank 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					
				18. Elevation: ____					
19. Remarks: Flat Ground Pump not installed at this time.				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: WICHITA, KANSAS License No. ____ Address: M. Arnold Signed: M. Arnold Date: 8-12-76 Authorized representative					

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

Form WWC-5