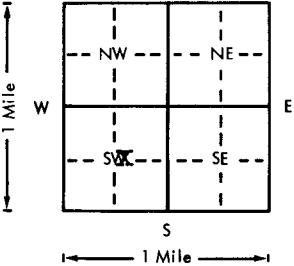


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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 SW 1/4 NE 1/4 SW 1/4	Section number 22	Township number T 26 S	Range number R 1W E/W
2. Distance and direction from nearest town or city: 6630 West 47th North Street address of well location if in city: Wichita, Kansas				3. Owner of well: Geroge Blades R.R. or street: 6630 West 47th North City, state, zip code: Wichita, Kansas		
4. Locate with "X" in section below: 				Sketch map: 6. Bore hole dia. 11 in. Completion date 3-30-77 Well depth 40 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: Above or below Threaded ☐ Welded ☐ Surface 12 in. RMP ☒ PVC ☐ Weight ☐ lbs./ft. Dia. 5 in. to 40 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 10' Set between 30 ft. and 40 ft. ft. and 1-1/8" Gravel pack? yes Size range of material 1-1/8"		
				11. Static water level: 15 ft. below land surface Date 3-30-77 mo./day/yr.		
(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 With: ____ Neat cement ____ Bentonite ☒ Concrete Depth: From 40" ft. to 14 ft.		
				16. Nearest source of possible contamination: Septic Tank ft. 100 Direction North Type 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:		
				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 4-15-77 Authorized representative		
				Topography: ____ Hill ____ Slope ☒ Upland ____ Valley		

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

Form WWC-5