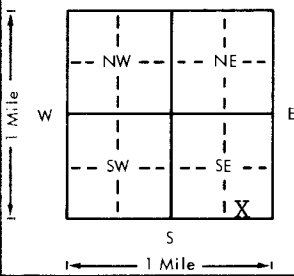


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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 SE 1/4 SE 1/4	Section number 36	Township number T 26 S R 2W	Range number E/W
2. Distance and direction from nearest town or city: 12000 W. 29th No. Wichita, Kansas			3. Owner of well: Coleman Employees Club R.R. or street: 801 E. 37th St. No. City, state, zip code: Wichita, Kansas			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 11 in. Completion date _____ Well depth 65 ft. 7-7-78		
				7. ☐ Cable tool ☒ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary		
5. Type and color of material		From	To	8. Use: ☐ Domestic ☐ Public supply ☐ Industry ☐ Irrigation ☐ Air conditioning ☐ Stock ☒ Lawn ☐ Oil field water ☐ Other		
Topsoil		0	3	9. Casing: Material Styrene Height: Above or below _____ Threaded _____ Welded 81 Surface 12 in. RMP ☒ PVC _____ Weight _____ lbs./ft. Dia. 5 in. to 65 ft. depth Wall Thickness: inches or _____ Dia. _____ in. to _____ ft. depth gage No. 200		
Brown Clay		3	16	10. Screen: Manufacturer's name _____ Sunflower Plastic Type styrene Dia. 5" Slot/gauge .06 Length 15' Set between 50 ft. and 65 ft. _____ ft. and _____ ft. Gravel pack? yes Size range of material 1/4-1/8"		
Fine Sand		16	35	11. Static water level: _____ mo./day/yr. 18 ft. below land surface Date 7-7-78		
Medium Sand		35	50	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.		
Coarse Sand		50	65	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 0 ft. to 10 ft.		
				16. Nearest source of possible contamination: Septic ft. 800 Direction South 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		
		(Use a second sheet if needed)				
18. Elevation:	19. Remarks: Flat Ground		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 7-27-78 Authorized representative			
Topography: ☐ Hill ☐ Slope ☐ Upland ☐ Valley						

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

Form WWC-5