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

27	1	W	1	NW SE SE
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

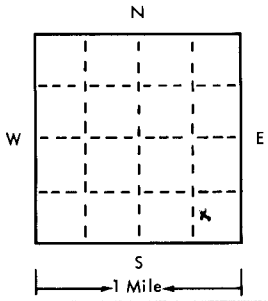
1 Location of well:	County	Township name	Fraction	Section number	Town number	Range number
	Sedgwick	Delano	NW SE SE	1	T 27 S	R 1 W

Distance and direction from nearest town or city:

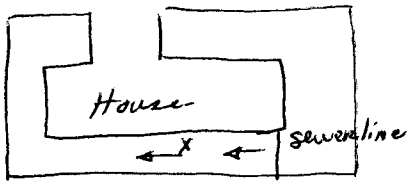
Street address of well location if in city: 2615 Benjamin, Wichita

3 Owner of well: Herbert Parks
Address: 2615 Benjamin, Wichita, Kans.

Locate with "X" in section below:



Sketch map:



4 Well depth: 33 ft. Date of completion 8-30-75
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 Sunflower 100 Height: above/~~below~~
Threaded ☐ Welded ☐ Surface 13 in.
Diam. Weight 0.100 ~~lbs/ft~~ W Thickness
6 in. to 23 ft. depth Drive shoe? ☐ Yes ☒ No
___ in. to ___ ft. depth

2

Type and color of material	From	To
Black dirt	0	2'
gray clay	2'	5'
med. sand	5'	15'
course sand	15'	30'
small sand	30'	33'
(use a second sheet if needed)		

8 Screen:
Manufacturer Sunflower Jetwell
Type perforated Dia. 6"
Slot/gauze .075 Length 10
Set between 23 ft. and 33 ft.
Fittings:
Gravel pack ☐ Yes ☒ No Size range of material ___

9 Static water level:
18 ft. below land surface Date 8-30-75

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: ~~Sewer~~ line
ft. 30 Direction east Type
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
Concrete slab to be installed by customer at surface of ground. He knows this is a regulation

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 [illegible] 8-27-75
Authorized representative

27 1 W 1 NW SE SE

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

Form WWC-5

677-H