

USE TYPEWRITER OR BALL  
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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<br><b>SEDGWICK</b>                 | Fraction<br><b>1/4 SE 1/4 SE 1/4</b> | Section number<br><b>6</b>                                                                                                                                                                                                                                                                                                                                                                                                 | Township number<br><b>T 27 S</b> | Range number<br><b>R 1W E/W</b> |
| 2. Distance and direction from nearest town or city:<br>Street address of well location if in city:                                                                        |                                 | <b>2249 N. Maize Rd.<br/>Wichita, Ks.</b> |                                      | 3. Owner of well:<br>R.R. or street:<br>City, state, zip code:<br><b>David Cramner<br/>2249 N. Maize Rd.<br/>Wichita, Ks.</b>                                                                                                                                                                                                                                                                                              |                                  |                                 |
| 4. Locate with "X" in section below:<br>N<br>W<br>E<br>S<br>1 Mile<br>1 Mile                                                                                               |                                 | Sketch map:<br>                           |                                      | 6. Bore hole dia. <b>11</b> in. Completion date _____<br>Well depth <b>50</b> ft. <b>4-13-79</b>                                                                                                                                                                                                                                                                                                                           |                                  |                                 |
| 5. Type and color of material                                                                                                                                              |                                 | From                                      | To                                   | 7. <input type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug<br><input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary                                                                                                                               |                                  |                                 |
| <b>Topsoil</b>                                                                                                                                                             |                                 | 0                                         | 2                                    | 8. Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry<br><input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock<br><input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other                                                                     |                                  |                                 |
| <b>Sandy Clay</b>                                                                                                                                                          |                                 | 2                                         | 10                                   | 9. Casing: Material <b>Styrene</b> Height: Above or below _____<br>Threading <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>12</b> in.<br>RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft.<br>Dia. <b>5</b> in. to <b>50</b> ft. depth Wall thickness _____ inches or<br>Dia. _____ in. to _____ ft. depth Gauge No. <b>200</b>                             |                                  |                                 |
| <b>Sand with Clay Streaks</b>                                                                                                                                              |                                 | 10                                        | 22                                   | 10. Screen: Manufacturer's name _____<br><b>Sunflower Plastic</b><br>Type <b>Styrene</b> Dia. <b>5"</b><br>Slot <b>1/16</b> in. <b>06</b> Length <b>20'</b><br>Set between <b>30</b> ft. and <b>50</b> ft.<br>ft. and _____ ft.                                                                                                                                                                                            |                                  |                                 |
| <b>Fine to Medium Sand</b>                                                                                                                                                 |                                 | 22                                        | 35                                   | 11. Static water level: _____ mo./day/yr.<br><b>22</b> ft. below land surface Date <b>4-13-79</b>                                                                                                                                                                                                                                                                                                                          |                                  |                                 |
| <b>Medium to Coarse Sand</b>                                                                                                                                               |                                 | 35                                        | 50                                   | 12. Pumping level below land surfaces:<br>_____ ft. after _____ hrs. pumping _____ g.p.m.<br>_____ ft. after _____ hrs. pumping _____ g.p.m.<br>Estimated maximum yield _____ g.p.m.                                                                                                                                                                                                                                       |                                  |                                 |
|                                                                                                                                                                            |                                 |                                           |                                      | <input checked="" type="checkbox"/> Water sample submitted: _____ mo./day/yr.<br>Yes <input type="checkbox"/> No <input type="checkbox"/> Date _____                                                                                                                                                                                                                                                                       |                                  |                                 |
|                                                                                                                                                                            |                                 |                                           |                                      | 14. Well head completion: <b>12</b> capped<br><input type="checkbox"/> Pitless adapter _____ inches above grade                                                                                                                                                                                                                                                                                                            |                                  |                                 |
|                                                                                                                                                                            |                                 |                                           |                                      | 15. Well grouted? <b>yes</b> <b>1-2</b> Fine Sand Mix<br>With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete<br>Depth: From <b>40"</b> ft. to <b>14'</b> ft.                                                                                                                                                                                        |                                  |                                 |
|                                                                                                                                                                            |                                 |                                           |                                      | 16. Nearest source of possible contamination: <b>Septic</b><br>ft. <b>75</b> Direction <b>West</b> Type <b>Tank</b><br>Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                               |                                  |                                 |
|                                                                                                                                                                            |                                 |                                           |                                      | 17. Pump: <input checked="" type="checkbox"/> Not installed<br>Manufacturer's name _____<br>Model number _____ HP _____ Volts _____<br>Length of drop pipe _____ ft. capacity _____ g.p.m.<br>Type:<br><input type="checkbox"/> Submersible <input type="checkbox"/> Turbine<br><input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating<br><input type="checkbox"/> Centrifugal <input type="checkbox"/> Other |                                  |                                 |
| (Use a second sheet if needed)                                                                                                                                             |                                 |                                           |                                      |                                                                                                                                                                                                                                                                                                                                                                                                                            |                                  |                                 |
| 18. Elevation:<br><br>Topography:<br><input type="checkbox"/> Hill<br><input type="checkbox"/> Slope<br><input type="checkbox"/> Upland<br><input type="checkbox"/> Valley | 19. Remarks: <b>Flat Ground</b> |                                           |                                      | 20. Water well contractor's certification:<br>This well was drilled under my jurisdiction and this report<br>is true to the best of my knowledge and belief.<br><b>Harp Well &amp; Pump</b> <b>236</b><br>Business name License No.<br>Address <b>Wichita, Ks.</b><br>Signed <b>M. Arnold</b> Date <b>5-12-79</b><br>Authorized representative                                                                             |                                  |                                 |

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

Form WWC-5