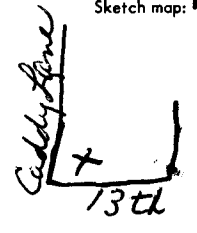


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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 Sedwick	Fraction SW 1/4 SW 1/4 SW 1/4	Section number 8	Township number T 27 S	Range number R 1 E
2. Distance and direction from nearest town or city: Street address of well location if in city: 1440 Caddy Lane				3. Owner of well: Ron Anderson R.R. or street: 1440 Caddy Lane City, state, zip code: Wichita, KS 67217		
4. Locate with "X" in section below: N W E S 1 Mile Sketch map: 				6. Bore hole dia. 4 1/2 in. Completion date 10/7/77 Well depth 48 ft.		
				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: Styrene Height: 12 in. or below Threaded ☐ Welded ☐ Surface 12 in. RMP ☐ PVC ☐ Weight 100 lbs./ft. Dia. 5 in. to 48 ft. depth Wall Thickness: inches or Dia. 4 in. to 48 ft. depth gage No. 100		
5. Type and color of material				From	To	10. Screen: Manufacturer's name Subflow
Red Clay				0	25	Type 100 Dia. 4
Red Sand				25	48	Slot/gauze Slot Length 48
						Set between 48 ft. and 35 ft.
						Gravel pack? ☒ Size range of material 40-60
						11. Static water level: 25 ft. below land surface Date 10/7/77
						12. Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield 5 g.p.m.
						13. Water sample submitted: ____ mo./day/yr. Yes ☒ No ☐ Date ____
						14. Well head completion: 12 inches above grade ____ Pitless adapter
						15. Well grouted? NO With: ☒ Neat cement ☐ Bentonite ☐ Concrete Depth: From ____ ft. to ____ ft.
						16. Nearest source of possible contamination: sewer ft. 50 Direction N Type sewer 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: 48' well was drilled. Was not completed and was destroyed by owner. Another well was drilled by another well driller. These wells were checked by me Oct 4-1977 Kim Anderson		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. Jet Drilling 313 Business name 257 N Sabin License No. ____ Address Wichita, KS Signed Kim Anderson Date 10/7/77 Authorized representative		

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

Form WWC-5