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

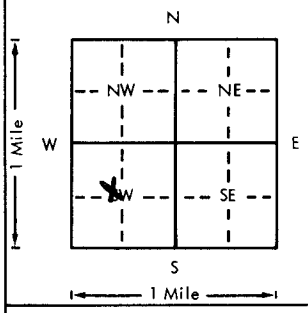
Billed to: Tuck Glasse NW NW SE SW

1. Location of well:	County	Fraction	Section number	Township number	Range number
	Sedgwick	1/4 ~~NW~~ 1/4 ~~SW~~ 1/4	8	T 27 S	R 1W E/W

2. Distance and direction from nearest town or city:
Street address of well location if in city: 1546 Valleyview Ct. Wichita, Kansas

3. Owner of well: Gary Atkins
R.R. or street: 1546 Valleyview Ct.
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 50 ft. 3-28-78

7. ___ Cable tool X Rotary ___ Driven ___ Dug
___ Hollow rod ___ Jetted ___ Bored ___ Reverse rotary

8. Use: ___ Domestic ___ Public supply ___ Industry
___ Irrigation ___ Air conditioning ___ Stock
X Lawn ___ Oil field water ___ Other

9. Casing: Material styrene Height: Above or ~~below~~
Threaded ___ Welded 81 Surface 12 in.
RMP X PVC ___ Weight ___ lbs./ft.
Dia. 5 in. to 50 ft. depth Wall Thickness: inches or
Dia. ___ in. to ___ ft. depth gage No. .200

5. Type ond color of material	From	To
Topsoil	0	3
Clay	3	25
Fine Sand	25	32
Medium Sand	32	50

(Use a second sheet if needed)

10. Screen: Manufacturer's name Sunflower Plastic
Type styrene Dia. 5"
Slot/gauze .06 Length 15'
Set between 35 ft. and 50 ft.
___ ft. and ___ ft.
Gravel pack? yes Size range of material 1/4-1/8"

11. Static water level: mo./day/yr.
30 ft. below land surface Date 3-28-78

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 1-2 fine sand mix
With: ___ Neat cement ___ Bentonite X Concrete
Depth: From 40" ft. to 14 ft.

16. Nearest source of possible contamination: City
30 ft. Direction East Type Sewer
Well disinfected upon completion? X Yes ___ No

17. Pump: X 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:
Topography:
___ Hill
___ Slope
___ Upland
___ Valley

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 Wichiata, Kansas License No.
Address
Signed M. Arnold Date 5-2-78
Authorized representative

T 27 R 1W E/W Sec 8 1/4 1/4 1/4 NW SW

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

Form WWC-5

MI-1023