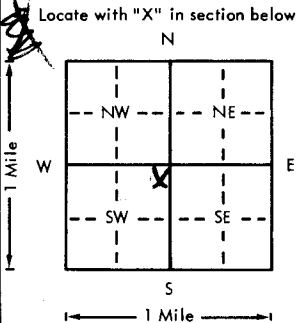


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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	Section NE 1/4 SW 1/4	Section number 9	Township number 27S	Range number 1 E
2. Distance and direction from nearest town or city: Street address of well location if in city:		21ST + RIDGE DRIVE - SW CORNER WICHITA, KANSAS		3. Owner of well: R.R. or street: City, state, zip code: D.L.H. FARMS / DR. HART 414 COURT LEIGH DRIVE WICHITA, KANSAS		
Locate with "X" in section below: 		Sketch map:		6. Bore hole dia. 11 in. Completion date 7-20-76 Well depth 92 ft.		
5. Type and color of material		From		To		7. Cable tool ☒ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary
TOPSOIL		0		30		8. Use: ☒ Domestic ☐ Public supply ☐ Industry ☐ Irrigation ☐ Air conditioning ☐ Stock ☐ Lawn ☐ Oil field water ☐ Other
GRAY CLAY		30		43		9. Casing: Material STYRENE Height: 12 in. Threaded ☐ Welded ☒ Surface ☐ RMP ☒ PVC ☐ Weight ☐ lbs./ft. Dia. 5 in. to 92 ft. depth Wall Thickness: inches or Dia. ☐ in. to ☐ ft. depth gage No. 200
BROWN SHALE		43		70		10. Screen: Manufacturer's name SUNFLOWER PLASTIC Type STYRENE Dia. 5" Slot gauge 106 Length 60' Set between 32 ft. and 92 ft. Gravel pack? YES Size range of material 1/4 - 1/8"
BLUE SHALE		70		90		11. Static water level: 37 ft. below land surface Date 7-20-76 mo./day/yr.
LIME STONE		90		92		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: 12 CAPPED ____ Pitless adapter ____ inches above grade
						15. Well grouted? YES With: ____ Neat cement ____ Bentonite ☒ Concrete Depth: From 40' to 14 ft.
						16. Nearest source of possible contamination: ft. ____ Direction ____ Type NONE 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
18. Elevation:		19. Remarks:		20. Water well contractor's certification:		
Topography: ☒ Hill ☒ Slope ☐ Upland ☐ Valley		SEPTIC TANK NOT INSTALLED AT THIS TIME. NO APPARENT SOURCE FOR CONTAMINATION.		This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. HARPWELL PUMP 236 Business name WICHITA, KANSAS License No. ____ Address WICHITA, KANSAS Signed M. Arnold date 8-9-76 Authorized representative		

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

Form WWC-5