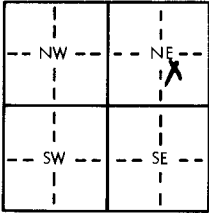


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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	Fraction 1/4 SE 1/4 NE 1/4	Section number 9	Township number T 27 S R 1W E/W	Range number	
2. Distance and direction from nearest town or city: 7231 Bittersweet, Wichita, Kansas Street address of well location if in city:				3. Owner of well: Fred Isernhagen Construction R.R. or street: 7231 Bittersweet City, state, zip code: Wichita, Kansas			
4. Locate with "X" in section below: N W E S 1 Mile 1 Mile		Sketch map: 				6. Bore hole dia. 11 in. Completion date _____ Well depth 95 ft. 8-25-78	
5. Type and color of material		From	To	7. ☐ Cable tool ☒ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary			
Topsoil		0	3	8. Use: ☒ Domestic ☐ Public supply ☐ Industry ☐ Irrigation ☐ Air conditioning ☐ Stock ☐ Lawn ☐ Oil field water ☐ Other			
Sandy clay		3	18	9. Casing: Material Styrene Height: Above or below Threaded ☐ Welded ☒ Surface 12 in. RMP ☒ PVC ☐ Weight _____ lbs./ft. Dia. 5 in. to 95 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 200			
				10. Screen: Manufacturer's name Sunflower plastic Type styrene Dia. 5" Slot/gage 1/4" .06 Length 20' Set between 75 ft. and 95 ft. _____ ft. and _____ ft. Gravel pack? yes Size range of material 1/2-1/8"			
				11. Static water level: _____ mo./day/yr. 15 ft. below land surface Date 8-25-78			
				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: _____ ☐ Pitless adapter 12 capped Inches above grade			
				15. Well grouted? yes 1-2 fine sand mix With: ☐ Neat cement ☐ Bentonite ☒ Concrete Depth: From 40" ft. 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			
		(Use a second sheet if needed)					
18. Elevation:		19. Remarks: Flat ground Septic system not installed at this time No apparent source for contamination				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 License No. Address Wichita, Kansas 67209 Signed on. Arnold Date 11-30-78 Authorized representative	

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

Form WWC-5