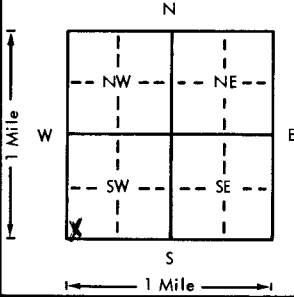


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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 SW 1/4 SW 1/4	Section number 10	Township number T 27 S	Range number R 1 W
2. Distance and direction from nearest town or city: one block north of 13th Street address of well location if in city: 1/8" east of Ridge				3. Owner of well: West Urban Little League Inc. R.R. or street: 10008 West Ninth City, state, zip code: Wichita, Kansas		
4. Locate with "X" in section below: Road. Sketch map: Wichita, Kansas				6. Bore hole dia. 11 in. Completion date 7-27-76 Well depth 55 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		
5. Type and color of material				9. Casing: Material styrene Height: Above or below 11 Threaded ☐ Welded ☒ Surface 12 in. RMP ☒ PVC ☐ Weight ☐ lbs./ft. Dia. 5 in. to 55 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/gauze .06 Length 20' Set between 35 ft. and 55 ft. Gravel pack? yes Size range of material 1-1/8"		
Sandy Soil				From 0	To 3	11. Static water level: 20' ft. below land surface Date 7-27-76
Medium Sand				3	14	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.
Clay				14	15	13. Water sample submitted: _____ mo./day/yr. _____ Yes _____ No Date _____
Medium Sand				15	52	14. Well head completion: 12 capped _____ Pitless adapter _____ inches above grade
Shale				52	55	15. Well grouted? yes With: _____ Neat cement _____ Bentonite ☒ Concrete Depth: From 40" ft. to 14 ft.
						16. Nearest source of possible contamination: Septic ft. 300 Direction South Type Tank 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 Water to be used for watering base- ball field.				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 Signed Mary Arnold Date 8-9-76 Authorized representative		

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

Form WWC-5