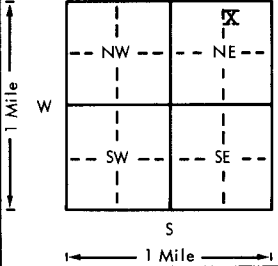


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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 NE SE NW NE 1/4 NE 1/4 NE 1/4	Section number 12	Township number T 27 S	Range number R 1W E/W	
2. Distance and direction from nearest town or city: 2823 River Park Drive. Street address of well location if in city: Wichita, Kansas			3. Owner of well: Vernon Day R.R. or street: 2823 River Park Drive City, state, zip code: Wichita, Kansas				
4. Locate with "X" in section below: N W E S 1 Mile		Sketch map: 		6. Bore hole dia. 11 in. Completion date Well depth 45 ft. 4-27-77			
5. Type and color of material		From	To	7. ☒ Cable tool ☒ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary			
Sandy Topsoil		0	4	8. Use: ☐ Domestic ☐ Public supply ☐ Industry ☐ Irrigation ☐ Air conditioning ☐ Stock ☒ Lawn ☐ Oil field water ☐ Other			
Brown Clay		4	6	9. Casing: Material Styrene Height: Above or below Threaded ☐ Welded ☒ Surface 12 in. RMP ☒ PVC ☐ Weight ☐ lbs./ft. Dia. 5 in. to 45 ft. depth Wall Thickness: inches or Dia. ☐ in. to ☐ ft. depth gage No. 200			
Fine Sand		6	25	10. Screen: Manufacturer's name Sunflower Plastic Type Styrene Dia. 5" Slot/gauge 0.06 Length 15' Set between 30 ft. and 45 ft. Gravel pack? yes Size range of material 1/2-1/8"			
Coarse Sand		25	43	11. Static water level: ☐ ft. below land surface Date 4-27-77 mo./day/yr.			
Blue Shale		43	45	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 With: ☐ Neat cement ☐ Bentonite ☒ Concrete Depth: From 40" ft. to 14 ft.			
				16. Nearest source of possible contamination: ft. 100 Direction South Type City 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			
18. Elevation:		19. Remarks:		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 M. Arnold Date 7-2-77 Authorized representative			

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

Form WWC-5