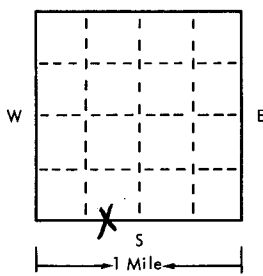


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

T R EW sec 1/4 1/4 1/4 No.

WATER WELL RECORD  
KSA 82a-1201-1215

Kansas State Dept. Of Health  
(Water Well Contractors)  
Forbes-Bldg. 740  
Topeka, Kansas 66620

1 Location of well:	County <b>Sedgwick</b>	Township name <b>Delano</b>	Fraction <b>SW 1/4 SW 1/4</b>	Section number <b>12</b>	Town number <b>27S</b>	Range number <b>1W</b>		
Distance and direction from nearest town or city: <b>3401 West 13th</b>			3 Owner of well: <b>Richard L. Rogers</b>					
Street address of well location if in city: <b>Wichita, Kansas</b>			Address: <b>3401 West 13th Street Wichita, Kansas 67203</b>					
Locate with "X" in section below: N  W E S 1 Mile			Sketch map:			4 Well depth: <b>50</b> ft. Date of completion <b>3-24-75</b> Well diameter <b>11</b> in.		
2 Type and color of material			From	To	5 <input type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary			
			<b>Dirt and Sandy Soil</b>		0	2	6 Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Commercial <input type="checkbox"/> Test well <input type="checkbox"/>	
			<b>Clay</b>		2	10	7 Casing: Material <b>Styrene</b> Height: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <b>12</b> in. Diam. <b>5</b> in. to <b>50</b> ft. depth Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No <b>5</b> in. to <b>50</b> ft. depth Weight <b>12</b> lbs./ft.	
			<b>Medium Sand</b>		10	50	8 Screen: Manufacturer <b>Sunflower Plastic</b> Type <b>Styrene</b> Dia. <b>5"</b> Slot/gauze <b>.005</b> Length <b>20'</b> Set between <b>30</b> ft. and <b>50</b> ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <b>1/2 - 1/8"</b>	
							9 Static water level: <b>18</b> ft. below land surface Date <b>3-24-75</b>	
							10 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.	
							11 Water sample submitted: <input type="checkbox"/> Yes <input type="checkbox"/> No Date ____	
							12 Well head completion: <input checked="" type="checkbox"/> Pitless adapter <b>12</b> <input checked="" type="checkbox"/> Inches above grade	
							13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Depth: From ____ ft. to <b>11</b> ft.	
							14 Nearest source of possible contamination: <b>NONE</b> ft. ____ Direction ____ Type ____ Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
(use a second sheet if needed)					15 Pump: <input type="checkbox"/> Not installed Manufacturer's name <b>Jacuzzi</b> Model number <b>7S4C</b> HP <b>3/4</b> Volts <b>230</b> Length of drop pipe <b>35</b> ft. capacity <b>20</b> g.m.p. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other			
16 Remarks: elevation <b>No apparent source for contamination.</b>			17 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. <b>Harp Well &amp; Pump 236</b> Business name <b>Wichita, Kansas</b> License No. <b>67209</b> Address <b>Wichita, Kansas</b> Signed <b>Mr. Orsall</b> Date <b>3-31-75</b> Authorized representative					

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5