

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 <u>Sedgwick</u>		Fraction <u>1/4 NE 1/4 NW 1/4</u>		Section number <u>13</u>		Township number <u>T 27 S</u>		Range number <u>R 1 E</u>	
2. Distance and direction from nearest town or city: <u>1341 Gow</u>				3. Owner of well: <u>Herbert Bliwer</u>					
Street address of well location if in city: <u>Wichita, Kas.</u>				R.R. or street: <u>1341 Gow</u>					
				City, state, zip code: <u>Wichita, Kansas</u>					
4. Locate with "X" in section below:				Sketch map:					
				6. Bore hole dia. <u>11</u> in. Completion date <u>8-30-75</u> Well depth <u>40</u> 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					
				9. Casing: Material <u>Styrene</u> Height: <u>above</u> or below Threaded ☐ Welded ☒ Surface <u>12</u> in. RMP ☒ PVC ☐ Weight <u>4</u> lbs./ft. Dia. <u>5</u> in. to <u>40</u> ft. depth Wall Thickness: inches or Dia. <u>5</u> in. to <u>40</u> ft. depth gage No. <u>20</u>					
5. Type and color of material				From		To		10. Screen: Manufacturer's name <u>Sunflower Plastic</u>	
<u>Sandy Top Soil</u>				<u>0</u>		<u>2</u>		Type <u>Styrene</u> Dia. <u>5"</u>	
<u>clay</u>				<u>2</u>		<u>12</u>		Slot/gauze <u>005</u> Length <u>10'</u>	
<u>Medium Sand</u>				<u>12</u>		<u>40</u>		Set between <u>30</u> ft. and <u>40</u> ft.	
								Gravel pack? <u>yes</u> size range of material <u>1/4-1/8"</u>	
								11. Static water level: <u>15</u> ft. below land surface Date <u>8-30-75</u>	
								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: <u>Capped</u>	
								____ Pitless adapter <u>12</u> inches above grade	
								15. Well grouted? <u>yes</u>	
								With: ☒ Neat cement ☐ Bestonite ☐ Concrete	
								Depth: From <u>40'</u> to <u>14</u> ft.	
								16. Nearest source of possible contamination: <u>None</u>	
								ft. ____ Direction ____ Type ____	
								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:				20. Water well contractor's certification:			
Topography:		<u>no apparent source for contamination</u>				This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.			
☒ Hill						<u>Harp Well Pump</u> <u>236</u>			
☒ Slope						Business name <u>Wichita, Kansas</u> License No. <u>1/4</u>			
☐ Upland						Address <u>Wichita, Kansas</u> <u>1/4</u>			
☐ Valley						Signed <u>M. Orsdel</u> Date <u>9-2-75</u> <u>1/4</u>			

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

Form WWC-5