

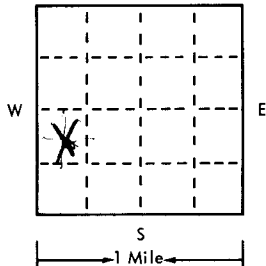
USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

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

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

~~SE~~ ~~NE~~ ~~SW~~ ~~NW~~

1 Location of well:	County <u>Sedgwick</u>	Township name <u>Deland</u>	Fraction <u>7-22-8</u>	Section number <u>17</u>	Town number <u>27S</u>	Range number <u>R-1-W</u>
Distance and direction from nearest town or city: <u>2 west Wichita</u> Street address of well location if in city: <u>927 N Maize Rd</u>				3 Owner of well: <u>Ray Stats</u> Address: <u>11529 Valley High</u>		
Locate with "X" in section below: N  Sketch map:				4 Well depth: <u>65</u> ft. Date of completion <u>4-16-75</u> Well diameter <u>5</u> in.		
2 Type and color of material				5 ☐ Cable tool ☒ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary		
				6 Use: ☒ Domestic ☐ Public supply ☐ Industry ☐ Irrigation ☐ Air conditioning ☐ Commercial ☐ Test well ☐		
gray clay sand mixed with clay sand				7 Casing: Material <u>RMP</u> Height: <u>above</u> below Threaded ☐ Welded ☐ Surface <u>18</u> in. Diam. <u>5</u> in. to <u>65</u> ft. depth Drive shoe? ☐ Yes ☒ No <u>5</u> in. to <u>65</u> ft. depth		
				8 Screen: Manufacturer <u>Jess H. and</u> Type <u>stainless</u> Dia. <u>5"</u> Slot/gauze <u>1/8"</u> Length <u>10'</u> Set between <u>65</u> ft. and <u>55</u> ft. Fittings: Gravel pack ☒ Yes ☐ No Size range of material <u>3/8</u>		
				9 Static water level: <u>35</u> ft. below land surface Date <u>4-16-75</u>		
				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: ☐ Yes ☒ No Date ____		
				12 Well head completion: ☐ Pitless adapter <u>18</u> inches above grade		
				13 Well grouted? ☒ Yes ☐ No ☐ Neat cement ☐ Bentonite ☒ cement Depth: From <u>14</u> ft. to <u>3</u> ft.		
				14 Nearest source of possible contamination: ft. <u>14</u> Direction <u>west</u> Type <u>creek</u> Well disinfected upon completion? ☒ Yes ☐ No		
				15 Pump: Manufacturer's name <u>pumpco</u> Model number <u>2348</u> HP <u>2</u> Volts <u>220</u> Length of drop pipe <u>50</u> ft. capacity <u>15</u> g.p.m. Type: ☒ Submersible ☐ Turbine ☐ Jet ☐ Reciprocating ☐ Centrifugal ☐ Other		
(use a second sheet if needed)						
16 Remarks: elevation Topography: ☒ Hill ☐ Slope ☐ Upland ☐ Valley				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. <u>Weninger</u> <u>235</u> Business name <u>Jim Weninger</u> License No. <u>235</u> Address <u>Maize Rd</u> Signed <u>Maize Rd</u> Date <u>5-24-75</u> Authorized representative		

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

Form WWC-5