

USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
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WATER WELL RECORD
KSA 82a-1201-1215

Kansas Department of Health and
Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

NE NE NE NW

County Sedgwick Fraction NW 1/4 SW 1/4 NE 1/4 Section number 20 Township number T 27 S Range number R 1W E/W					
1. Location of well: Distance and direction from nearest town or city: <u>641 Caddy Lane</u> Street address of well location if in city: <u>Wichita, Kansas</u>					
2. Owner of well: J.J. Dethample R.R. or street: 641 Caddy Lane City, state, zip code: Wichita, Kansas					
4. Locote with "X" in section below: N E S W S N E W 1 Mile					
Sketch map: 6. Bore hole dia. <u>.11</u> in. Well depth <u>55</u> ft.					
8. Use: Domestic ___ Public supply ___ Industry ___ Irrigation ___ Air conditioning ___ Stock ___ ☒ Lawn ___ Oil field water ___ Other ___					
9. Casing: Material <u>Styrene</u> Height Above or Below Surface _____ Threaded _____ Welded <u>GI</u> Surface _____ In. _____ RMP <u>X</u> PVC _____ Weight _____ lbs./ft. _____ Dia. <u>5</u> in. to <u>55</u> ft. depth Wall Thickness inches or _____ Dia. _____ in. to _____ ft. depth Gage No. <u>.200</u>					
10. Screen Manufacturer's name: Sunflower Plastic Type <u>Styrene</u> Dia. <u>5"</u> Slot size <u>.06</u> Length <u>15'</u> Set between <u>40</u> ft. and <u>55</u> ft. Gravel pack? <u>yes</u> Size range of material <u>+ - 1/8"</u>					
11. Static water level: _____ mo./day/yr. <u>30</u> ft. below land surface Date <u>3-30-77</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>well seal</u> Pitless adapter <u>12</u> Inches above grade					
15. Well grouted? <u>yes</u> With: Neat cement ___ Bentonite ___ Concrete <u>X</u> Depth From <u>40"</u> ft. to <u>17'</u> ft. OK					
16. Nearest source of possible contamination: City _____ <u>100</u> ft. Direction <u>North</u> Type <u>Sewer</u> Well disinfected upon completion? <u>X</u> Yes ___ No ___					
17. Pump: Not installed Manufacturer's name <u>Sta-Rite</u> Model number <u>2004C01</u> HP <u>1/2</u> Volts <u>110</u> Length of drop pipe <u>40</u> ft. capacity <u>20</u> g.p.m. Type: ☒ Submersible ___ Turbine ___ Jet ___ Reciprocating ___ Centrifugal ___ Other					
(Use a second sheet if needed)					
18. Elevation: Topography: Hill ___ Slope ___ Upland <u>X</u> Valley ___					
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. <u>Harp Well & Pump</u> Business name License No. _____ Address <u>Wichita, Kansas</u> Signed <u>M. Arnold</u> Date <u>4-23-77</u> Authorized representative					

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

Form WWC-5