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

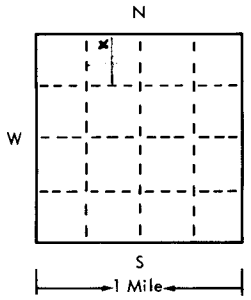
1 Location of well:	County	Township name	Fraction	Section number	Town number	Range number
	Sedgwick	Delano	NW-NE-NW	24	T-27S	R1W

Distance and direction from nearest town or city:

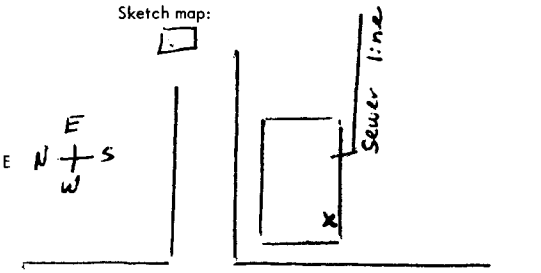
Street address of well location if in city: 638 Westridge

3 Owner of well: Jerry Spaur
Address: 741 Westridge
Wichita, Kans.

Locate with "X" in section below:



Sketch map:



4 Well depth: 35 ft. Date of completion 11-19-75
Well diameter 10 in.

5 ☐ Cable tool ☐ Rotary ☐ Driven ☐ Dug
☐ Hollow rod ☐ Jetted ☒ Bored ☐ Reverse rotary

6 Use: ☒ Domestic ☐ Public supply ☐ Industry
☐ Irrigation ☐ Air conditioning ☐ Commercial
☐ Test well ☐ _____

7 Casing: Material RMP Height: above/below
Threaded ☐ Welded ☐ Surface 13 in.
Diam. Weight 0.100 lbs./ft.
6 in. to 25 ft. depth Drive shoe? ☐ Yes ☒ No
___ in. to ___ ft. depth

2 Type and color of material	From	To
red sand course	0	15'
gray clay & large gravel	15'	17'
med. sand.	17'	25'
fine sand	25'	30'
course sand.	30'	35'
(use a second sheet if needed)		

8 Screen:
Manufacturer Sunflower
Type RMP Dia. 6 in
Slot/gauze .075 x 2 in Length
Set between 25 ft. and 35 ft.
Fittings:
Gravel pack ☐ Yes ☒ No Size range of material

9 Static water level:
15 ft. below land surface Date 11-19-75

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: 13
☐ Pitless adapter ☒ Inches above grade

13 Well grouted? ☒ Yes ☐ No
☒ Neat cement ☐ Bentonite ☐ _____
Depth: From 0 ft. to 11 ft.

14 Nearest source of possible contamination: Sewer
ft. 20 Direction East Type line
Well disinfected upon completion? ☒ Yes ☐ No

15 Pump: ☒ Not installed
Manufacturer's name
Model number HP Volts
Length of drop pipe ft. capacity g.m.p.
Type:
☐ Submersible ☐ Turbine
☐ Jet ☐ Reciprocating
☐ Certrifugal ☐ Other

16 Remarks: elevation
basement well

Topography:
☐ Hill
☐ Slope
☒ Upland
☐ Volley

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.
Whitchurch Well Service 309
Business name License No.
Address 520 James St. Maize
Signed [signature] Date 12-17-75
Authorized representative

27 1W 24 NW NE NW

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

Form WWC-5

677-H