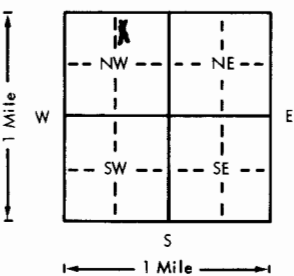


USE TYPEWRITER OR BALL  
POINT PEN-PRESS FIRMLY,  
PRINT CLEARLY.

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<br><b>Sedgwick</b> | Fraction<br><b>1/4 NE 1/4 NW 1/4</b>                                                                                                  | Section number<br><b>27</b> | Township number<br><b>T 27 S</b>                                                                                                                                                                                                                                                                                                                                                                                             | Range number<br><b>R 1 W</b>                                                                                                                                                                                                                                                                                                           |
| 2. Distance and direction from nearest town or city:<br>Street address of well location if in city:                                                  |  |                           | 3. Owner of well: <b>Mr. Eddie Allen</b><br>R.R. or street: <b>1400 Sierra Drive</b><br>City, state, zip code: <b>Wichita, Kansas</b> |                             |                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                        |
| 4. Locate with "X" in section below:<br>N<br>W<br>E<br>S<br>1 Mile                                                                                   |  |                           | Sketch map:<br>                                       |                             |                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                        |
| 5. Type and color of material                                                                                                                        |  |                           | From                                                                                                                                  | To                          | 6. Bore hole dia. <b>11</b> in. Completion date <b>8-2-76</b><br>Well depth <b>42</b> ft.                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                        |
| Sandy Topsoil                                                                                                                                        |  |                           | 0                                                                                                                                     | 2                           | 7. Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug<br><input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                        |
| Clay                                                                                                                                                 |  |                           | 2                                                                                                                                     | 8                           | 8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry<br><input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock<br><input checked="" type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other                                                                       |                                                                                                                                                                                                                                                                                                                                        |
| Fine Sand                                                                                                                                            |  |                           | 8                                                                                                                                     | 25                          | 9. Casing: Material <b>styrene</b> Weight: Above or below <b>///</b><br>Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <b>12</b> in.<br>RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight <b>42</b> lbs./ft.<br>Dia. <b>5</b> in. to <b>42</b> ft. depth Wall Thickness <b>1/2</b> inches or<br>Dia. <b>5</b> in. to <b>42</b> ft. depth gage No. <b>200</b> |                                                                                                                                                                                                                                                                                                                                        |
| Clay                                                                                                                                                 |  |                           | 25                                                                                                                                    | 29                          | 10. Screen: Manufacturer's name <b>Sunflower Plastic</b><br>Type <b>styrene</b> Dia. <b>5"</b><br>Slot/size <b>///</b> Length <b>10'</b><br>Set between <b>32</b> ft. and <b>42</b> ft.<br>Gravel pack? <b>yes</b> Size range of material <b>1-1/8"</b>                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                        |
| Medium Sand                                                                                                                                          |  |                           | 29                                                                                                                                    | 42                          | 11. Static water level: <b>15</b> ft. below land surface Date <b>8-2-76</b><br>mo./day/yr.                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                        |
|                                                                                                                                                      |  |                           |                                                                                                                                       |                             | 12. Pumping level below land surfaces:<br>_____ ft. after _____ hrs. pumping _____ g.p.m.<br>_____ ft. after _____ hrs. pumping _____ g.p.m.<br>Estimated maximum yield _____ g.p.m.                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                        |
|                                                                                                                                                      |  |                           |                                                                                                                                       |                             | 13. Water sample submitted: _____ mo./day/yr.<br>Yes _____ No _____ Date _____                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                        |
|                                                                                                                                                      |  |                           |                                                                                                                                       |                             | 14. Well head completion: <b>12</b> capped<br>Pitless adapter _____ inches above grade                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                        |
|                                                                                                                                                      |  |                           |                                                                                                                                       |                             | 15. Well grouted? <b>yes</b><br>With: <input checked="" type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete<br>Depth: From <b>40"</b> ft. to <b>14</b> ft.                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                        |
|                                                                                                                                                      |  |                           |                                                                                                                                       |                             | 16. Nearest source of possible contamination: <b>Septic Tank</b><br>ft. <b>50</b> Direction <b>South</b> type <b>Tank</b><br>Well disinfected upon completion? <input checked="" type="checkbox"/> Yes _____ No _____                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                        |
|                                                                                                                                                      |  |                           |                                                                                                                                       |                             | 17. Pump: <input checked="" type="checkbox"/> Not installed<br>Manufacturer's name _____<br>Model number _____ HP _____ Volts _____<br>Length of drop pipe _____ ft. capacity _____ g.p.m.<br>Type:<br><input type="checkbox"/> Submersible <input type="checkbox"/> Turbine<br><input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating<br><input type="checkbox"/> Centrifugal <input type="checkbox"/> Other   |                                                                                                                                                                                                                                                                                                                                        |
| 18. Elevation:                                                                                                                                       |  |                           | 19. Remarks: <b>Flat Ground</b>                                                                                                       |                             |                                                                                                                                                                                                                                                                                                                                                                                                                              | 20. Water well contractor's certification:<br>This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.<br><b>Harp Well &amp; Pump 236</b><br>Business name License No.<br>Address <b>Wichita, Kansas</b><br>Signed <b>M. Arnold</b> Date <b>8-9-76</b><br>Authorized representative |
| Topography:<br><input type="checkbox"/> Hill<br><input type="checkbox"/> Slope<br><input type="checkbox"/> Upland<br><input type="checkbox"/> Valley |  |                           |                                                                                                                                       |                             |                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                        |

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

Form WWC-5