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, Konsas 66620

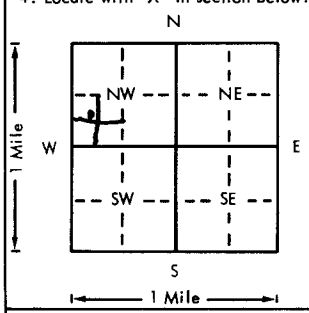
1. Location of well: County Sedgwick | Fraction NW 1/4 SW 1/4 NW 1/4 | Section number 29 | Township number T 27 S | Range number R 1 W E(W)

X Distance and direction from nearest town or city:

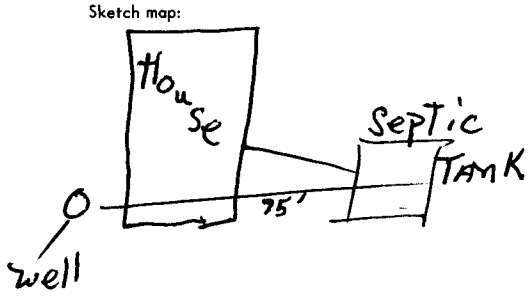
Street address of well location if in city:

3. Owner of well: D H McCoy
R.R. or street: 611 Wetmor
City, state, zip code: Wichita KS 67209

4. Locate with "X" in section below:



Sketch map:



6. Bore hole dia. ___ in. Completion date
Well depth 40 ft. 8-25-77

7. ___ Cable tool ___ Rotary ___ Driven ___ Dug
___ Hollow rod ___ Jetted X Bored ___ Reverse rotary

8. Use: ___ Domestic ___ Public supply ___ Industry
___ Irrigation ___ Air conditioning ___ Stock
X Lawn ___ Oil field water ___ Other

9. Casing: Material RMP | Height: Above or below
Threaded ___ Welded ___ | Surface 12 in.
RMP X PVC ___ | Weight ___ lbs./ft.
Dia 4 in. to 35 ft. depth | Wall Thickness: inches or
Dia 5 in. to 40 ft. depth | gage No. 120

5. Type and color of material	From	To
Reddish Clay	0	8
Light Tan fine sand	8	25
" " med. Course Sand	25	40

(Use a second sheet if needed)

10. Screen: Manufacturer's name Sunflower Mfg. Co.
Type RMP Dia. 5"
Slot/gauze 3/40 Length 91'
Set between 31 ft. and 40 ft.
___ ft. and ___ ft.
Gravel pack? No Size range of material ___

11. Static water level: mo./day/yr.
16 ft. below land surface Date 8-25-77

12. Pumping level below land surfaces:
18 ft. after 1 hrs. pumping 10 g.p.m.
___ ft. after ___ hrs. pumping ___ g.p.m.
Estimoted maximum yield 20 g.p.m.

13. Water sample submitted: mo./day/yr.
___ Yes X No Date ___

14. Well heod completion:
___ Pitless adapter 12 Inches above grade

15. Well grouted? Yes
With: ___ Neat cement ___ Bentonite X Concrete
Depth: From 0 ft. to 10 ft.

16. Nearest source of possible contamination: CE
ft. 30 Direction E Type Sewer
Well disinfected upon completion? ___ Yes X No

17. Pump: ___ Not installed
Manufacturer's name Sears
Model number 390 HP 1 Volts 230
Length of drop pipe 35 ft. capacity 10 g.p.m.
Type:
___ Submersible ___ Turbine
X Jet ___ Reciprocating
___ Centrifugal ___ Other

18. Elevation:

Topography:
___ Hill
___ Slope
X Upland
___ Valley

19. Remarks:

20. Water well contractor's certification:
This well wos drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Business name Protheroe Pump & Well 295 License No.
Address 827 W. 27th So
Signed [signature] Date 8-25-77
Authorized representative

T 27 R 1 W Sec 29 NW SW NW 1/4 1/4 1/4

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

Form WWC-5

MI-1023