WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL	Fraction	Section Number	Township Number	Range Number
County: Sedgwick	SW ¼ NE ¼ SE ¼	35	T 27 S	R 1 E/W

Distance and direction from nearest town or city? Wichita

Street address of well if located within city? 2349 South West St.

2 WATER WELL OWNER: Mid Kansas Construction Co. Well No. 1

RR#, St. Address, Box # : 1245 S. Santa Fe

City, State, ZIP Code : Wichita, Kansas 67211

Board of Agriculture, Division of Water Resources Application Number:

3 DEPTH OF COMPLETED WELL 60 ft. Bore Hole Diameter 26 in. to 60 ft., and ..... in. to ..... ft.

Well Water to be used as: 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial 5 Public water supply 6 Oil field water supply 7 Lawn and garden only 8 Air conditioning 9 Dewatering 10 Observation well 11 Injection well 12 Other (Specify below) Sand Plant

Well's static water level 18 ft. below land surface measured on Oct month 16 day 80 year

Pump Test Data : Well water was ..... ft. after ..... hours pumping ..... gpm

Est. Yield 250 gpm: Well water was ..... ft. after ..... hours pumping ..... gpm

4 TYPE OF BLANK CASING USED: 1 Steel 2 PVC 3 RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below)

Casing Joints: Glued ..... Clamped ..... Welded ..... Threaded .....

Blank casing dia 12 in. to 50 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.

Casing height above land surface 12 in., weight 43.77 lbs./ft. Wall thickness or gauge No .330

TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 6 Concrete tile 7 PVC 8 RMP (SR) 9 ABS 10 Asbestos-cement 11 Other (specify) ..... 12 None used (open hole)

Screen or Perforation Openings Are: 1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 10 Other (specify) ..... 11 None (open hole)

Screen-Perforation Dia 12 in. to 60 ft., Dia ..... in. to ..... ft., Dia ..... in to ..... ft.

Screen-Perforated Intervals: From 50 ft. to 60 ft., From ..... ft. to ..... ft.
From 8 ft. to ..... ft., From ..... ft. to ..... ft.

Gravel Pack Intervals: From 13 ft. to 60 ft., From ..... ft. to ..... ft.
From ..... ft. to ..... ft., From ..... ft. to ..... ft.

5 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other .....

Grouted Intervals: From 3 ft. to 13 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

What is the nearest source of possible contamination: 1 Septic tank 2 Sewer lines 3 Lateral lines 4 Cess pool 5 Seepage pit 6 Pit privy 7 Sewage lagoon 8 Feed yard 9 Livestock pens 10 Fuel storage 11 Fertilizer storage 12 Insecticide storage 13 Watertight sewer lines 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below)

Direction from well North How many feet 1300 ? Water Well Disinfected? Yes No

Was a chemical/bacteriological sample submitted to Department? Yes ..... No ..... If yes, date sample was submitted ..... month ..... day ..... year: Pump Installed? Yes ..... No .....

If Yes: Pump Manufacturer's name Layne & Bowler, Inc. Model No. 6DRELC HP 7½ Volts 460

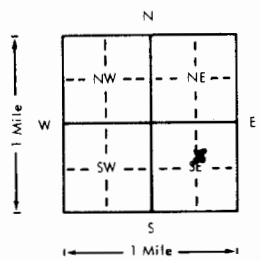
Depth of Pump Intake 50 ft. Pumps Capacity rated at 110 gal./min.

Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on Oct month 16 day 1980 year and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 102

This Water Well Record was completed on October month 21 day 1980 year under the business name of Layne Western Co., Inc. by (signature) [signature]

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



ELEVATION:

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	6	Top soil			
6	45	Med. sand & gravel			
45	60	Med. to coarse sand & gravel			

Depth(s) Groundwater Encountered 1. 18 ft. 2. ..... ft. 3. ..... ft. 4. ..... ft. (Use a second sheet if needed)

INSTRUCTIONS: Use typewriter or ball point pen, *please press firmly* and *PRINT* clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Division of Environment, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY T 27 R 1 E/W SEC. 35 SW ¼ NE ¼ SE ¼

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