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

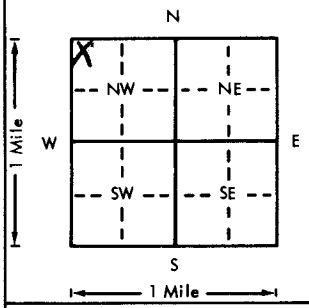
W2 NW NE

1. Location of well:	County	Fraction	Section number	Township number	Range number
	Sedgwick	~~NW~~ 1/4 ~~NW~~ 1/4 ~~NW~~ 1/4	13	T 27 S	R 2 E (W)

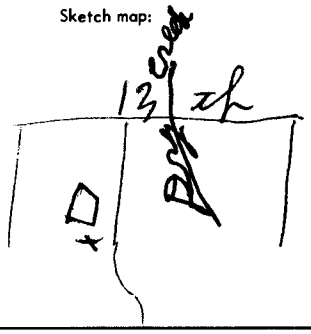
2. Distance and direction from nearest town or city: 5mi West
Street address of well location if in city: 1269 Firefly

3. Owner of well: Hultman
R.R. or street: 1269 Firefly
City, state, zip code: Wichita KS 67

4. Locate with "X" in section below:



Sketch map:



5. Type and color of material	From	To
yellow clay	0	20
fine yellow SAND	20	35
pea gravel	35	40

(Use a second sheet if needed)

6. Bore hole dia. 8 in. Completion date 4/24/77
Well depth 40 ft.

7. __ Cable tool ✓ Rotary __ Driven __ Dug
__ Hollow rod __ Jetted __ Bored __ Reverse rotary

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

9. Casing: Material _____ Height: Above or below
Threaded ___ Welded ___ Surface 12 in.
RMP X PVC ___ Weight 100 lbs./ft.
Dia. 5 in. to 40 ft. depth Wall Thickness: (inches) or
Dia. ___ in. to ___ ft. depth gage No. 1/4-100 PVC

10. Screen: Manufacturer's name Sunflower
Type Blanked Dia. 5"
Slot/gauze Slot Length 5'
Set between 35 ft. and 40 ft.
___ ft. and ___ ft.
Gravel pack? yes Size range of material 1/4"

11. Static water level: mo./day/yr.
20 ft. below land surface Date 4/24/77

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:
___ Pitless adapter Capped Inches above grade

15. Well grouted? By owner
With: ___ Neat cement ___ Bentonite ___ Concrete
Depth: From — ft. to — ft.

16. Nearest source of possible contamination:
ft. 50 Direction West Type Sewer
Well disinfected upon completion? ✓ Yes ___ No

17. Pump: ✓ Not installed
Manufacturer's name ___
Model number ___ HP ___ Volts ___
Length of drop pipe ___ ft. capacity ___ g.p.m.
Type:
___ Submersible ___ Turbine
___ Jet ___ Reciprocating
___ Centrifugal ___ Other

27 T — 2 R E (W) 17 Sec NW NW NW 1/4 1/4 1/4

18. Elevation:

Topography:
X Hill
___ Slope
___ Upland
___ 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.
Jet Drilling 313
Business name License No.
Address 257 N Sabin
Signed Virgil Sanderson Date 4/24
Authorized representative

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

Form WWC-5

M1-1023