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

WATER WELL RECORD
KSA 82a-1201-1215

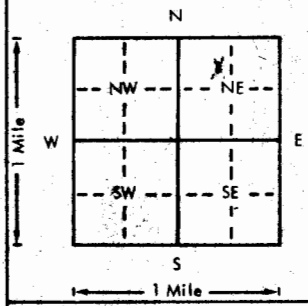
Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

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

2. Distance and direction from nearest town or city: 1101 Azure
Street address of well location if in city: Wichita, Kansas

3. Owner of well: Gary Calvert Construction
R.R. or street: 1958 North Burns
City, state, zip code: Wichita, Kansas

4. Locate with "X" in section below:



Sketch map:

6. Bore hole dia. 11 in. Completion date _____
Well depth 90 ft. 7-28-78

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

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

9. Casing: Material Styrene Height: Above or below
Threaded ____ Welded X1 Surface 12 in.
RMP X PVC ____ Weight ____ lbs./ft.
Dia. 5 in. to 90 ft. depth Wall Thickness: inches or
Dia. ____ in. to ____ ft. depth gage No. 200

5. Type and color of material	From	To
Topsoil	0	3
Clay	3	18
Fine sand	18	68
Medium sand	68	90
18 ft unsat silt & clay		
(Use a second sheet if needed)		

10. Screen: Manufacturer's name Sunflower plastic
Type styrene Dia. 5"
Slot/gauge .020 Length 15'
Set between 75 ft. and 90 ft.
____ ft. and ____ ft.
Gravel pack? Yes Size range of material 1/8"

11. Static water level: mo./day/yr.
25 ft. below land surface Date 7-28-78

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:
X Pitless adapter 12 Inches above grade

15. Well grouted? Yes 1-2 fine sand mix
With: ____ Neat cement ____ Bentonite X Concrete
Depth: From 40' ft. to 14 ft.

16. Nearest source of possible contamination:
ft. ____ Direction ____ Type None
Well disinfected upon completion? X Yes ____ No

17. Pump: ____ Not installed
Manufacturer's name McDonalds
Model number unknown HP 1 Volts 230
Length of drop pipe 60 ft. capacity 20 g.p.m.
Type:
X Submersible ____ Turbine
____ Jet ____ Reciprocating
____ Centrifugal ____ Other

18. Elevation:

Topography:
____ Hill
____ Slope
____ Upland
____ Valley

19. Remarks:
Flat ground
Septic system not installed at this time

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.
Harp Well & Pump 236
Business name License No.
Address Wichita, Kansas 67209
Signed _____ Date _____
Authorized representative

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

Form WWC-5

M1-1083