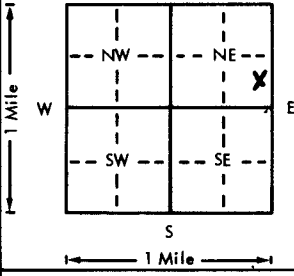


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

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

Billed to: *Dean Norris Pllbg.*

1. Location of well: County <i>Sedgwick</i> Fraction <i>1/4 SE 1/4 NE 1/4</i> Section number <i>10</i> Township number <i>T 27 S</i> Range number <i>R 2 E</i>	
2. Distance and direction from nearest town or city: <i>18 mi Marksdale</i>	
3. Owner of well: <i>4 Lloyd Torman</i>	
Street address of well location if in city: <i>1821 Marksdale</i>	
City, state, zip code: <i>Goddard, Kansas</i>	
4. Locate with "X" in section below: Sketch map: 	
5. Type and color of material	
6. Bore hole dia. <i>11</i> in. Completion date <i>3-16-76</i>	
7. ☒ Cable tool ☒ Rotary ☐ Driven ☐ Dug	
8. Use: ☒ Domestic ☐ Public supply ☐ Industry	
9. Casing: Material <i>stainless</i> Height <i>12</i> ft. above or below	
Threaded ☐ Welded ☐ Surface ☐ Th.	
RMP ☒ PVC ☐ Weight ☐ lbs./ft.	
Dia. <i>5</i> in. to <i>100</i> ft. depth Wall Thickness: inches or	
Dia. ☐ in. to ☐ ft. depth gage No. <i>200</i>	
10. Screen: Manufacturer's name <i>Sunflower Plastic</i>	
Type <i>stainless</i> Dia. <i>5"</i>	
Slot gauge <i>50</i> Length <i>20'</i>	
Set between <i>80</i> ft. and <i>100</i> ft.	
Gravel pack <i>yes</i> size range of material <i>1/4-1/8"</i>	
11. Static water level: <i>30</i> ft. below land surface Date <i>3-16-76</i>	
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: <i>12</i> inches above grade	
____ Pitless adapter	
15. Well grouted? <i>yes</i>	
With: ____ Neat cement ____ Bentonite ☒ Concrete	
Depth: From <i>40</i> ft. to <i>40</i> ft.	
16. Nearest source of possible contamination <i>Septic Tank</i>	
ft. <i>60</i> Direction <i>East</i> Type <i>Septic Tank</i>	
Well disinfected upon completion? ☒ Yes ____ No	
17. Pump: Not installed	
Manufacturer's name <i>Ho-Rite</i>	
Model number <i>1P602</i> HP <i>3/4</i> Volt <i>230</i>	
Length of drop pipe <i>50</i> ft. capacity <i>20</i> g.p.m.	
Type: ☒ Submersible ☐ Turbine	
____ Jet ☐ Reciprocating	
____ Centrifugal ☐ Other	
18. Elevation: ____	
19. Remarks: <i>Flat Ground</i>	
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.	
Business name <i>Thurskill Pump</i> License No. <i>236</i>	
Address <i>Wichita, Kans.</i>	
Signed <i>M. Arnold</i> Date <i>3-20-76</i>	
Authorized representative	

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

Form WWC-5