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

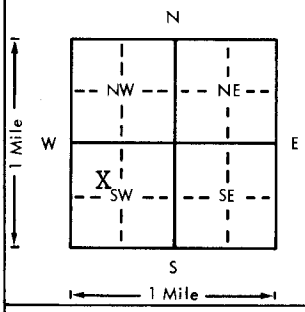
1. Location of well:	County	Fraction	Section number	Township number	Range number
	SEDGWICK	1/4 NW 1/4 SW 1/4	10	T 28 S	R 1W E/W

2. Distance and direction from nearest town or city:
Street address of well location if in city: 6900 W. 36th St. So. Wichita, Kansas

3. Owner of well: Warner Co., Inc.
R.R. or street: 426 So. Meridian
City, state, zip code: Valley Center, Kansas

4. Locate with "X" in section below:

Sketch map:



6. Bore hole dia. 11 in. Completion date ____
Well depth 60 ft. 6-22-78

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 gl Surface 12 in.
RMP X PVC ____ Weight ____ lbs./ft.
Dia. 5 in. to 60 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	15
Fine Sand	15	35
Medium Sand	35	60
(Use a second sheet if needed)		

10. Screen: Manufacturer's name Sunflower Plastic
Type styrene Dia. 5"
Slot/gauze .06 Length 15'
Set between 45 ft. and 60 ft.
____ ft. and ____ ft.
Gravel pack? yes Size range of material ¼-1/8"

11. Static water level: mo./day/yr.
25 ft. below land surface Date 6-22-78

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 1-2Fine 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 Sta-Rite
Model number 20P4D02 HP 3/4 Volts 230
Length of drop pipe 45 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.
No apparent source for contamination.

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 W. M. Arnold Date 7-6-78
Authorized representative

28 - 1 - 10 W
Sec T R E/W
1/4 1/4 1/4 NW SW

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

Form WWC-5

MI-1023