

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: <u>Sedgwick</u>	Fraction: <u>SW 1/4 NW 1/4 SW 1/4</u>	Section number: <u>11</u>	Township number: <u>T 28 S R 1 E</u>	Range number: <u>1</u>																					
2. Distance and direction from nearest town or city: Street address of well location if in city: <u>3656 Hoover Ct. Rd Wichita</u>			3. Owner of well: <u>21st Electric</u> R.R. or street: <u>512 W. 21st</u> City, state, zip code: <u>Wichita, KS 67214</u>																								
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. <u>4 1/2</u> in. Completion date: <u>10/30/78</u> Well depth <u>49</u> ft.																							
				7. <input checked="" type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary																							
5. Type and color of material		From	To	8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input checked="" type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other																							
<table border="1"> <tr><td>top soil.</td><td>0</td><td>2</td></tr> <tr><td>red clay</td><td>2</td><td>21</td></tr> <tr><td>fine sand</td><td>21</td><td>31</td></tr> <tr><td>red clay</td><td>31</td><td>32</td></tr> <tr><td>med gravel</td><td>32</td><td>41</td></tr> <tr><td>gray clay</td><td>41</td><td>49</td></tr> <tr><td>fine sand</td><td>49</td><td></td></tr> </table>		top soil.	0	2	red clay	2	21	fine sand	21	31	red clay	31	32	med gravel	32	41	gray clay	41	49	fine sand	49				9. Casing: Material: <u>Galvne</u> Weight: <u>1.50</u> lbs./ft. Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight <u>1.50</u> lbs./ft. Dia. <u>5</u> in. to <u>49</u> ft. depth Wall Thickness: inches or Dia. <u>5</u> in. to <u>49</u> ft. depth gage No. <u>200</u>		
top soil.	0	2																									
red clay	2	21																									
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				10. Screen: Manufacturer's name: <u>Sunflower</u> Type: <u>200</u> Dia: <u>5 1/4</u> Slot gauze: <u>1/16</u> Length: <u>6 ft</u> Set between: <u>39</u> ft. and <u>44</u> ft. <u>39</u> ft. and <u>44</u> ft. Gravel pack? <u>Yes</u> Size range of material: <u>3/8</u>																							
				11. Static water level: <u>18</u> ft. below land surface Date: <u>10/30/78</u>																							
				12. Pumping level below land surfaces: <u>22</u> ft. after <u>1/2</u> hrs. pumping <u>10</u> g.p.m. <u>22</u> ft. after <u>1</u> hrs. pumping <u>10</u> g.p.m. Estimated maximum yield <u>15-30</u> g.p.m.																							
				13. Water sample submitted: <u>X</u> Yes <u>No</u> Date: _____																							
				14. Well head completion: <u>12</u> Pitless adapter <u>12</u> inches above grade																							
				15. Well grouted? <u>Yes</u> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>6</u> ft. to <u>16</u> ft.																							
				16. Nearest source of possible contamination: ft. _____ Direction: <u>None</u> Type: _____ Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No																							
				17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name: _____ Model number: _____ HP: _____ Volts: _____ Length of drop pipe: _____ ft. capacity: _____ g.p.m. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other																							
18. Elevation:		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. <u>Weninger Pulling 318</u> Business name: <u>Colwick</u> License No. _____ Address: <u>Colwick</u> Signed: <u>Weninger</u> 10/30/78 Authorized representative																							

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

Form WWC-5