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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 Sedgwick	Fraction SW 1/4 NE 1/4 SE 1/4	Section number 23	Township number T 28 S R 3	Range number 3
2. Distance and direction from nearest town or city: Street address of well location if in city:		#15 S. Lakeview Goddard, Ks.		3. Owner of well: R.R. or street: City, state, zip code: Mr. J. C. Tipton #15 South Lakeview Goddard, Kansas 67052		
4. Locate with "X" in section below: N W E S 1 Mile 1 Mile		Sketch map: 		6. Bore hole dia. 11 in. Completion date Well depth 125 ft. 10-2-76		
5. Type and color of material		From	To	7. ☒ Cable tool ☒ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary		
Topsoil		0	3	8. Use: ☐ Domestic ☐ Public supply ☐ Industry ☒ Irrigation ☐ Air conditioning ☐ Stock ☒ Lawn ☐ Oil field water ☐ Other		
Sandy Soil		3	20	9. Casing: Material styrene Height: Above or below Threaded ☐ Welded ☒ Surface 12 in. RMP ☒ PVC ☐ Weight ☐ lbs./ft. Dia. 5 in. to 125 ft. depth Wall Thickness .200 inches or Dia. ☐ in. to ☐ ft. depth Gauge No. ☐		
Fine Sand		20	26	10. Screens: Manufacturer's name Sunflower Plastic Type styrene Dia. 5" Slot .06 Length 45' Set between 80 ft. and 125 ft. Gravel pack? yes Size range of material 1/8" - 1/4"		
Clay		26	29	11. Static water level: ☐ mo./day/yr. 28 ft. below land surface Date 10-2-76		
Blue Shale		29	125	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 12 capped Inches above grade		
				15. Well grouted? yes With: ☐ Neat cement ☒ Bentonite ☐ Concrete Depth: From 40 ft. to 14 ft.		
				16. Nearest source of possible contamination: Septic Tank ft. 55 Direction East Type Tank 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		
18. Elevation:		19. Remarks: Flat Ground This well to be used for yard.		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 Signed M. Arnold Date 11-1-76 Authorized representative		

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

Form WWC-5