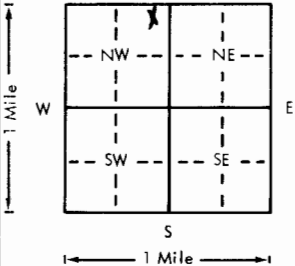


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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 Sedgwick	Fraction 1/4 NE 1/4 NW 1/4	Section number 28	Township number T 28 S	Range number R 3W E/W
2. Distance and direction from nearest town or city: 27217 W. 55th St. So. Street address of well location if in city: Garden Plain, Kansas			3. Owner of well: Hahn & Hilger R.R. or street: RR # 1 City, state, zip code: Garden Plain, Kansas			
4. Locate with "X" in section below: 			Sketch map: 6. Bore hole dia. 11 in. Completion date _____ Well depth 60 ft. 3-27-78			
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 ☐ Lown ☐ Oil field water ☐ Other	
Clay			3	6	9. Casing: Material Styrene Height: Above or below/ Threaded ☐ Welded ☒ CL Surface 12 in. RMP ☒ PVC ☐ Weight _____ lbs./ft. Dia. 5 in. to 60 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 200	
Red Shale			6	45	10. Screen: Manufacturer's name Sunflower Plastic Type styrene Dia. 5" Slot/gauze .06 Length 45' Set between 15 ft. and 60 ft. _____ ft. and _____ ft. Gravel pack? yes Size range of material 1/4-1/8"	
Grey Shale			45	60	11. Static water level: 15 ft. below land surface Date 3-27-78 _____ ft. below land surface Date _____	
					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: capped ☐ Pitless adapter 12 inches above grade	
					15. Well grouted? yes 1-2 Fine Sand Mix With: ☐ Neat cement ☐ Bentonite ☒ Concrete Depth: From 6 ft. to 16 ft.	
					16. Nearest source of possible contamination: None ft. _____ Direction _____ Type _____ 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	
					(Use a second sheet if needed)	
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. Harp Well & Pump 236 Business name License No. Address Wichita, Kansas Signed M. Arnold Date 4-25-78 Authorized representative		
Tapography: ☐ Hill ☐ Slope ☐ Upland ☐ Valley		Flat Ground Septic System not installed at this time. No Apparent source for contamination. Well will be in basement.				

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

Form WWC-5