

USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
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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 SEDGECWICK	Fraction 1/4 NE 1/4 NE 1/4	Section number 3	Township number T 29 S	Range number R 1 E
2. Distance and direction from nearest town or city: 5915 WEST 73RD SO. WICHITA, KANSAS				3. Owner of well: M. W. BRILEY R.R. or street: 5915 WEST 73RD SOUTH City, state, zip code: WICHITA, KANSAS		
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 11 in. Completion date 9-30-76 Well depth 60 ft.		
N 1 Mile NW NE X 1 Mile 1 Mile SW SE 1 Mile S				7. ☒ Cable tool ☒ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary		
5. Type and color of material				8. Use: ☒ Domestic ☐ Public supply ☐ Industry ☐ Irrigation ☐ Air conditioning ☐ Stock ☐ Lawn ☐ Oil field water ☐ Other		
				9. Casing: Material STEEL Weight 12 lbs./ft. Threaded ☒ Welded ☐ Surface 12 in. RMP ☒ PVC ☐ Weight 1200 lbs./ft. Dia. 5 in. to 60 ft. depth Wall Thickness: inches or Dia. 5 in. to 60 ft. depth gage No. 1200		
				10. Screen: Manufacturer's name SUNFLOWER PLASTIC Type STYRENE Dia. 5" Slot gauge 106 Length 10' Set between 50 ft. and 60 ft. Gravel pack? YES Size range of material 1/4 - 1/8"		
				11. Static water level: 25 ft. below land surface Date 9-30-76 mo./day/yr.		
				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: 12 CAPPED ____ Pitless adapter ____ inches above grade		
				15. Well grouted? YES With: ☒ Neat cement ☐ Bentonite ☒ Concrete Depth: From 40' to 14 ft.		
				16. Nearest source of possible contamination: 100 ft. Direction SOUTH Type SEPTIC 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:		20. Water well contractor's certification:		
Topography: ____ Hill ____ Slope ____ Upland ____ Valley		FLAT GROUND		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 WICHITA KANSAS License No. ____ Address WICHITA KANSAS Signed M. Arnold Date 10-29-76 Authorized representative		

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

Form WWC-5