

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

T R EW sec 1/4 1/4 1/4 No.

WATER WELL RECORD
KSA 82a-1201-1215

Kansas State Dept. Of Health
(Water Well Contractors)
Forbes-Bldg. 740
Topeka, Kansas 66620

1 Location of well:	County Sedgwick	Township name Ohio	Fraction SE SE SE	Section number 8	Town number 29S	Range number 1W
Distance and direction from nearest town or city: Street address of well location if in city:			3 Owner of well: Kenneth Pike Address: 1802 Katherine Wichita, Kansas			
Locate with "X" in section below: N W E S 1 Mile			Sketch map: <i>D.T.P.</i>		4 Well depth: <u>90</u> ft. Date of completion <u>4-1-75</u> Well diameter <u>11</u> in.	
2 Type and color of material			From		To	
			Dirt and top soil		0	2
			Clay		2	18
			Sand		18	90
					5 <input 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	
					6 Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Commercial <input type="checkbox"/> Test well	
					7 Casing: Material <u>Styrene</u> Weight: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface <u>12 1/4</u> in. Diam. <u>5</u> in. to <u>90</u> ft. depth Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No <u> </u> in. to <u> </u> ft. depth	
					8 Screen: Manufacturer <u>Sunflower Plastic</u> Type <u>Styrene</u> Dia. <u>5"</u> Slot/gauze <u>.005</u> Length <u>20'</u> Set between <u>70</u> ft. and <u>90</u> ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material <u>1/8"</u>	
					9 Static water level: <u>26</u> ft. below land surface Date <u>4-1-75</u>	
					10 Pumping level below land surfaces: <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. <u> </u> ft. after <u> </u> hrs. pumping <u> </u> g.p.m. Estimated maximum yield <u> </u> g.p.m.	
					11 Water sample submitted: <input type="checkbox"/> Yes <input type="checkbox"/> No Date <u> </u>	
					12 Well head completion: <input checked="" type="checkbox"/> Pitless adapter <u>12</u> <input checked="" type="checkbox"/> Inches above grade	
					13 Well grouted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentogite <input type="checkbox"/> <u> </u> Depth: From <u>0</u> ft. to <u>12</u> ft.	
					14 Nearest source of possible contamination: <u>Septic tank</u> ft. <u>70</u> Direction <u>South</u> Type <u> </u> Well disinfected upon completion <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
					15 Pump: <input type="checkbox"/> Not installed Manufacturer's name <u>Sta-Rite</u> Model number <u>LP6D2</u> HP <u>3/4</u> Volts <u>230</u> Length of drop pipe <u>60</u> ft. capacity <u>20</u> g.m.p. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other	
16 Remarks: elevation					17 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 Serv. 236 Business name License No. <u>67209</u> Address <u>Wichita, Kansas</u> Signed <u>Miss Arnold</u> Date <u>4-2-75</u> Authorized representative	
Topography: <input type="checkbox"/> Hill <input checked="" type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley						

Forward the white, blue and pink copies to the Kansas State Dept. Of Health.

Form WWC-5