

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

WATER WELL RECORD
KSA 82a-1201-1215

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

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

1 Location of well:	County Sedgwick	Township name Ohio	Fraction NW 8W 8W	Section number 20	Town number 29S	Range number 1W
Distance and direction from nearest town or city: 2 miles East of Clearwater, 103W. & 103 So., 1/4 mile		3 Owner of well: Bill Bachman Company Address: 1901 West 13th Street Wichita, Kansas 67203				
Locate with "X" in section below: N W E S 1 Mile		Sketch map: North Clearwater, Kansas		4 Well depth: 72 ft. Date of completion 4-10-75 Well diameter 11 in.		
2 Type and color of material		From		To		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 <input type="checkbox"/>
						7 Casing: Material Styrene Height: above/below Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 12 in. Diam. 5 in. to 72 ft. depth Weight 12 lbs./ft. Drive shoe? <input type="checkbox"/> Yes <input type="checkbox"/> No
						8 Screen: Sunflower Plastic Manufacturer Styrene Dia. 5 in. Type 005 Slot/gauze 15 Length 57 ft. and 72 ft. Set between 57 ft. and 72 ft. Fittings: Gravel pack <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Size range of material 1/4-1/8"
						9 Static water level: 20 ft. below land surface Date 4-10-75
				10 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.		
				11 Water sample submitted: <input type="checkbox"/> Yes <input type="checkbox"/> No Date ____		
				12 Well head completion: <input checked="" type="checkbox"/> Pitless adapter 12 <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"/> Bentonite <input type="checkbox"/> Depth: From 0 ft. to 11 ft.		
				14 Nearest source of possible contamination: ft. 90 Direction West Type Septic Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
				15 Pump: <input type="checkbox"/> Not installed Manufacturer's name Sta-Rite Model number LP6D2 HP 3/4 Volts 230 Length of drop pipe 35 ft. capacity 20 g.p.m. 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 Wichita, Kansas License No. 236 Address Wichita, Kansas Signed Mrs. Arnold Date 4-11-75 Authorized representative				

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

Form WWC-5