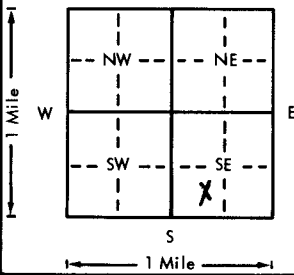


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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 SW 1/4 SE 1/4	Section number 23	Township number T 29 S	Range number R 32 1/4 W
2. Distance and direction from nearest town or city: Clearwater, Ks.				3. Owner of well: Home State Bank R.R. or street: R. # 1 City, state, zip code: Clearwater, Kansas		
4. Locate with "X" in section below:		Sketch map:				6. Bore hole dia. 11 in. Completion date 8-16-76 Well depth 55 ft.
						7. ☐ Cable tool ☒ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary
5. Type and color of material		From	To	8. Use: ☐ Domestic ☐ Public supply ☐ Industry ☐ Irrigation ☐ Air conditioning ☐ Stock ☒ Lawn ☐ Oil field water ☐ Other		
Sandy Topsoil		00	3	9. Casing: Material styrene Height: Above or below 12 in. Threaded ☐ Welded ☒ Surface 12 in. RMP ☐ PVC ☐ Weight 12 lbs./ft. Dia. 5 in. to 55 ft. depth Wall thickness: inches or Dia. 5 in. to 55 ft. depth gage No. 200		
Clay		3	24	10. Screen: Manufacturer's name Sunflower Plastic Type styrene Dia. 5 " Slot 1/4 " 0.06 Length 10 " Set between 45 ft. and 55 ft. Gravel pack? yes Size range of material 1-1/8"		
Medium Sand		24	55	11. Static water level: 25 ft. below land surface Date 8-16-76 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 ft. to 14 ft.		
				16. Nearest source of possible contamination: City Sewer ft. 50 Direction SW Type Sewer 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: This well is to be used for watering the bank lawn only.				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 Wichita, Kansas License No. ____ Address 10. Arnold Signed 9-7-76 Date 9-7-76 Authorized representative

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

Form WWC-5