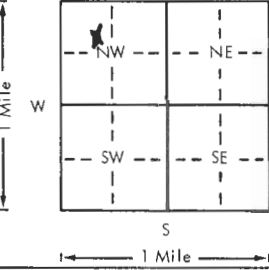


USE TYPEWRITER OR BALL
POINT PEN-PRESS FIRMLY,
PRINT CLEARLY.

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 NW 1/4 NW 1/4	Section number 5	Township number T 29 S R 3W E/W	Range number
2. Distance and direction from nearest town or city: Street address of well location if in city: 601 S. E. Drive Clearwater, Kansas			3. Owner of well: R.R. or street: City, state, zip code: Jerry Falke 120 East Ross Clearwater, Kansas			
4. Locate with "X" in section below: N Sketch map: 			6. Bore hole dia. 11 in. Completion date _____ Well depth 45 ft. 6-7-77			
5. Type and color of material			7. ☐ Cable tool ☒ Rotary ☐ Driven ☐ Dug ☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary			
			8. Use: ☐ Domestic ☐ Public supply ☐ Industry ☐ Irrigation ☐ Air conditioning ☐ Stock ☒ Lawn ☐ Oil field water ☐ Other			
			9. Casing: Material Styrene Height: Above of below Threaded ☐ Welded ☒ Surface 12 in. RMP ☒ PVC ☐ Weight _____ lbs./ft. Dia 5 in. to 45 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 200			
			10. Screen: Manufacturer's name Sunflower Plastic Type styrene Dia. 5" Slot 1/16 in. Length 15' Set between 30 ft. and 45 ft. _____ ft. and _____ ft. Gravel pack? yes size range of material 1/4-1/8"			
			11. Static water level: _____ mo./day/yr. 17 ft. below land surface Date 6-7-77			
(Use a second sheet if needed)			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 40" ft. to 14 ft.			
			16. Nearest source of possible contamination: City ft. 100 Direction North 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			
			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 8-8-77 Authorized representative			
			18. Elevation:			
			19. Remarks:			
			Topography: ☐ Hill ☒ Slope ☐ Upland ☐ Valley			

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

Form WWC-5