

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 Sedgwick	Fraction 1/4 SW 1/4 NW 1/4	Section number 23	Township number T 29 S	Range number R 3W E/W
2. Distance and direction from nearest town or city: 1/2 South of 95th South on 151st West, Street address of well location if in city: 1/8 Mile East.				3. Owner of well: Jim Baker Constr. R.R. or street: 1719 South Leonine City, state, zip code: Wichita, Kansas		
4. Locate with "X" in section below: N W E S 1 Mile 1 Mile Sketch map: Wichita, Kansas				6. Bore hole dia. 11 in. Completion date 5-3-77 Well depth 75 ft.		
				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 or below ☒ Threaded ☐ Welded ☒ Surface 12 in. RMP ☒ PVC ☐ Weight ☐ lbs./ft. Dia. 5 in. to 75 ft. depth Wall Thickness: inches or Dia. ☐ in. to ☐ ft. depth Gage No. 200		
5. Type and color of material				From	To	10. Screen: Manufacturer's name Sunflower Plastic
Topsoil				0	3	Type Styrene Dia. 5"
Clay				3	14	Slot/gauge .06 Length 20'
Fine Sand				14	45	Set between 55 ft. and 75 ft.
Medium Sand				45	75	Gravel pack? yes Size range of material 1-1/8"
						11. Static water level: 25 ft. below land surface Date 5-3-77 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: Well Seal ____ Pitless adapter 12 inches above grade
						15. Well grouted? yes With: ____ Neat cement ____ Bentonite ☒ Concrete Depth: From 0 ft. to 10 ft.
						16. Nearest source of possible contamination: NONE ft. ____ Direction ____ Type ____ Well disinfected upon completion? ☒ Yes ____ No
						17. Pump: Not installed Manufacturer's name Sta-Rite Model number 20P4D02 HP 3/4 Volts 230 Length of drop pipe 60 ft. capacity 20 g.p.m. Type: ☒ Submersible ____ Turbine ____ Jet ____ Reciprocating ____ Centrifugal ____ Other
(Use a second sheet if needed)						
18. Elevation:		19. Remarks:		20. Water well contractor's certification:		
Topography: ____ Hill ☒ Slope ____ Upland ____ Valley		Septic System was not installed when the well was drilled. No apparent source for contamination. Well to be in the building.		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 Signed M. Arnold Authorized representative 8-26-77		

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

Form WWC-5