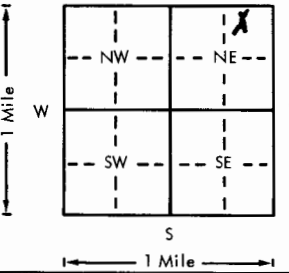


USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

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 <u>Sumner</u>		Fraction <u>NW/4 NE 1/4 NE 1/4</u>		Section number <u>1</u>	Township number T <u>30</u> S <u>5</u> R <u>1</u> E <u>W</u>	Range number <u>1</u>
2. Distance and direction from nearest town or city: Street address of well location if in city: <u>629 Avenue D Peck, Kansas</u>			3. Owner of well: <u>Vincent Hopsell</u> R.R. or street: <u>2642 North Edwards</u> City, state, zip code: <u>Wichita, Kansas</u>			
4. Locate with "X" in section below: N W E S 1 Mile			Sketch map: 		6. Bore hole dia. <u>5</u> in. Completion date <u>6-2-79</u> Well depth <u>65</u> ft.	
5. Type and color of material			From	To	7. <input checked="" 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	
<u>Topsoil</u>			<u>0</u>	<u>3</u>	8. 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"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	
<u>Brown clay</u>			<u>3</u>	<u>19</u>	9. Casing: Material <u>STYRENE</u> Height <u>Above</u> or below Threaded <input type="checkbox"/> Welded <u>Gal</u> Surface <u>12</u> in. RMP <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Weight _____ lbs./ft. Dia. <u>5</u> in. to <u>65</u> ft. depth Wall thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>1200</u>	
<u>Fine Sand</u>			<u>19</u>	<u>34</u>	10. Screen: Manufacturer's name <u>SUNFLOWER PLASTIC</u> Type <u>STYRENE</u> Dia. <u>5"</u> <u>60</u> gauze <u>106</u> Length <u>15 ft.</u> Set between <u>50</u> ft. and <u>65</u> ft. ft. and _____ ft.	
<u>Gray clay</u>			<u>34</u>	<u>38</u>	Gravel pack? <u>YES</u> Size range of material <u>1/4-1/8"</u>	
<u>Medium Sand</u>			<u>38</u>	<u>48</u>	11. Static water level: _____ mo./day/yr. <u>25</u> ft. below land surface Date <u>6-2-79</u>	
<u>Coarse Sand</u>			<u>48</u>	<u>65</u>	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. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____	
					14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter <u>12</u> inches above grade	
					15. Well grouted? <u>YES</u> With: _____ Neat cement _____ Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>40"</u> to <u>14</u> ft.	
					16. Nearest source of possible contamination: _____ ft. <u>100</u> Direction <u>SE</u> Type <u>Septic Tank</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
					17. Pump: _____ Not installed Manufacturer's name <u>Sta-Rite</u> Model number <u>LP602</u> HP <u>3/4</u> Volt <u>230</u> Length of drop pipe <u>50</u> ft. capacity <u>20</u> g.p.m. Type: <input checked="" type="checkbox"/> Submersible _____ Turbine _____ Jet _____ Reciprocating _____ Centrifugal _____ Other	
18. Elevation:		19. Remarks: <u>Flat Ground</u>		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. <u>HARPWELL Pump 236</u> Business name _____ License No. _____ Address <u>WICHITA, KANSAS</u> Signed <u>M. Arnold</u> Date _____ Authorized representative <u>8-27-79</u>		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley						

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

Form WWC-5