WATER WELL RECORD (WWC-5)

Latitude	Longitude	Section	Township	Range	E Fraction 1/4 1/4 1/4	
Datum	Elevation	County				
VATER WELL OWNER		WELL WATER US	E		PERMIT & ID NUMBERS (AS REQUIRED)	
Name					DWR Application No.:	
Business		WELL INFORMAT	TION	KDHE / EPA Project Code:		
Address		Depth of well: ft.			Site Name:	
		Dry well			KDHE UIC Class V Form Completed: Yes No	
Well location at owner's address		measured bel on (mm/dd/y	ove land surface	County Permit: Yes No Permit ID: Lease Name & Well #: # of dewatering wells:		
ASING		GROUT & PLUGO	GING MATERIALS			
Type of blank casing used:		Grout or Plug interval (ft			Description	
Casing type details: Blank casing diameter: inches		From			2000.p.00.	
Was casing removed?						
Top of casing is curren						
Reason required if top feet below ground surf	ground of casing is now less than 5 face for a hand dug well or ground surface for all other					
types of wens.		COMMENTS				
	AND OWNERS SERVICE					
	plugged pursuant to the s		ractor's license and wa	s complete	d on I certify that this	
				_	under the business name of	
			, Kansas Water Well C	Contractor's	License No under the	

Send one copy to WATER WELL OWNER and retain one for your records.

person at its submittal

authority of the designated person as defined in K.A.R. 28-30-2(j) and signed and certified by the electronic signature of the designated