WATER WELL RECORD SE SE SW NW Form WWC-5 Division of Water Resources App. No.							
1 LO	CATION)C	F WATER WELL		1 1/4 HANG	Section Number		Range Number R BE W
Street/Rural Address of Well Location; if unknown, distance & direction Global Positioning System (GPS) information:							
from nearest town or intersection: If at owner's address, check here . Latitude:							
2129 Harbor lite Ct Longitude:							••••
2 WATER WELL OWNER: MAD 83, MAD 27							
RR#, Street Address, Box #: 2/29 Harbor Lite Ct GPS u						ke/Model:)
City, State, ZIP Code : Wielt 1204					☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey Est. Accuracy: ☐ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m		
3 LOCATE WELL WITH AN "X" IN 4 DEPTH OF COMPLETED WELL 35							
	'H AN "X" l	IN 4 DEPTH (OF COMPLETED	سرير WELL	ft.		
SECTION BOX: Depth(s) Groundwater Encountered (1)							3)ft.
Pump test data: Well water wasft. after hours pumping gpn							
EST. YIELDgpm. Well water wasft. after							
w E Bore Hole Diameter							
WELL WATER TO BE USED AS: □ Public water supply □ Geothermal □ Injection well							
SWSE Domestic Feedlot Oil field water supply Dewatering Other (Specify below)							
Industrial							
Was a chemical/bacteriological sample submitted to Department? Yes No							
S If yes, mo/day/yr sample was submitted							
1 mile Water well disinfected? ☐ Yes ■ No							
5 TYPE OF CASING USED: Steel PVC Other							
CASING JOINTS: Glued Clamped Welded Threaded							
Casing diameter							
Casing height above land surface							
TYPE OF SCREEN OR PERFORATION MATERIAL: Steel Stainless Steel PVC Other (Specify)							
Brass Galvanized Steel None used (open hole)							
SCREEN OR PERFORATION OPENINGS ARE:							
☐ Continuous slot ☐ Mill slot ☐ Gauze wrapped ☐ Torch cut ☐ Drilled holes ☐ None (open hole)							
Louvered shutter Key punched Wire wrapped Saw cut Other (specify) SCREEN-PERFORATED INTERVALS: From ft. to ft.							
SCREEN-PERFORATED INTERVALS: From							
From							
GRAVEL PACK INTERVALS: From							
From							
1	ntervals:						. ft. toft.
3				rioiii	11. 10 11.,	From	. 11. 1011.
What is the nearest source of possible contamination: Septic tank Lateral lines Pit privy Livestock pens Insecticide storage Other (specify below)							
Sewer lines							
■ Watertight sewer lines — Seepage pit ☐ Feedyard ☐ Fertilizer storage ☐ Oil well/gas well							
	1	well Fast					
FROM	TO	LITHOL	OGIC LOG	FROM	TO LITHO. LO	OG (cont.) <u>or</u> PLU	GGING INTERVALS
Ø	70	Jost De	ort (
4	77	FIND	Jon Ju	me			
19	35	Course	lan so	net			
	ļ						
	 						
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ☑ constructed, ☐ reconstructed, or ☐ plugged							
under my jurisdiction and was completed on (mo/day/year)							
Kansas Water Well Contractor License No. 1. This Water Well Record was completed on (mo/lay/year) . Contractor License No. 1. This Water Well Record was completed on (mo/lay/year) . Contractor License No. 1. This Water Well Record was completed on (mo/lay/year) . Contractor License No. 1. This Water Well Record was completed on (mo/lay/year) . Contractor License No. 1. This Water Well Record was completed on (mo/lay/year) . Contractor License No. 1. This Water Well Record was completed on (mo/lay/year) . Contractor License No. 1. This Water Well Record was completed on (mo/lay/year) . Contractor License No. 1. This Water Well Record was completed on (mo/lay/year) . Contractor License No. 1. This Water Well Record was completed on (mo/lay/year) . Contractor License No. 1. This Water Well Record was completed on (mo/lay/year) . Contractor License No. 1. This Water Well Record was completed on (mo/lay/year) . Contractor License No. 1. This Water Well Record was completed on (mo/lay/year) . Contractor License No. 1. This Water Well Record was completed on (mo/lay/year) . Contractor License No. 1. This Water Well Record was completed on (mo/lay/year) . Contractor License No. 1. This Water Well Record was completed on (mo/lay/year) . Contractor License No. 1. This Water Well Record was completed on (mo/lay/year) . Contractor License No. 1. This Water Well Record was completed on (mo/lay/year) . Contractor License No. 1. This Water Well Record was completed on (mo/lay/year) . Contractor License No. 1. This Water Well Record was completed on (mo/lay/year) . Contractor License No. 1. This Water Well Record was completed on (mo/lay/year) . Contractor License No. 1. This Water Well Record was completed on (mo/lay/year) . Contractor License No. 1. This Water Well Record was completed on (mo/lay/year) . Contractor License No. 1. This Water Well Record was completed on (mo/lay/year) . Contractor License No. 1. This was completed							
under the business name of the transfer or hell point and PLE SE PRESCRIPTION SERVICE DESCRIPTION SERVICE OF HELD AND ADDRESS TO SERVICE OF HELD ADDRESS T							
INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367.							
Telephone	e 785-296-552	22. Send one copy to V	WATER WELL OWNER	and retain one for y	our records. Include fee	of \$5.00 for each co	onstructed well. Visit us at
http://www.kdheks.gov/waterwell/index.html.							
KSA 82a-1212							