WATER WELL RECORD		Form '	WWC-5	Division of Wate	r Resources App. N	o.	
1 LOCATION OF WATER WELV County: County		Fraction W	JW WW W		Township No.	Range Numb	
Street/Rural Address of Well	Location; if	unknown, distanc	e & direction	Global Positioning			
from nearest town or intersection: If at owner's address, check here .				Latitude: (in decimal degrees)			
1344 m otopela				Longitude: (in decimal degrees) Elevation:			
				<u>Datum</u> : ☐ WGS 84, ☐ NAD 83, ☐ NAD 27			
2 WATER WELL OWNER: RR#, Street Address, Box #: 1344				Collection Method: GPS unit (Make/Model:)			
City, State, ZIP Code				☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey			
	weg	uto Ka	6729	Est. Accuracy:			
3 LOCATE WELL WITH AN "X" IN 4 DE	PTH OF C	OMPLETED WI	ELI.	<i>40</i> ft.			
✓ N WEL	N WELL'S STATIC WATER LEVELft. below land surface measured on mo/day/yr59						
Pump test data: Well water wasft. at							
W NW NE E EST. YIELDgpm. Well water wasft. after							gpm
W E Bore Hole Diameter							
Domestic Feedlot Oil field water supply Dewatering Other (Specify below							
Irrigation Industrial Monestic-lawn & garden Monitoring well							
Was a chemical/bacteriological sample submitted to Department? Yes Yes If yes, mo/day/yr sample was submitted							
Water well disinfected? Yes No							
5 TYPE OF CASING USED:	Steel	X PVC	Other		••••		
CASING JOINTS: Glued Clamped Welded Threaded							
Casing diameter							
Casing height above land surface							
☐ Steel ☐ Stainless Steel							
☐ 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							
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft.							
From							ft.
From							
6 GROUT MATERIAL: ☐ Neat cement							
Grout Intervals: From							
What is the nearest source of possible contamination: Septic tank Lateral lines Pit privy Livestock pens Insecticide storage Other (specify below)							
Sewer lines Cesspool Sewage lagoon Fuel storage Abandoned water well							
Watertight sewer lines Direction from well	Seepage pit	Feedyard	Fertilizer st	orage			
	ITHOLOGIC	C LOG	FROM		OG (cont.) or PLU	GGING INTE	RVALS
0 11 0 10/	2 2	il	0		(00) 02.1.20	O DI TO II TI	TC VI ILB
11 21 F	ine_	Ton D	and				
2/40 Cour	se)	tan Sa					
						,	
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)and this record is true to the best of my knowledge and belief.							
Kansas Water Well Contractor's	bicense No,	Thi	s Water Well P	was completed	en (mo/day/year)	1577	
under the business name of				by (signature)		answers Sand	three copies
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 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at							
retephone 763-290-3324. Send one co	υργιο WAIL !	r well owner an	iu reiain one ior v	our records. Include fee	OI \$5.00 for each co	instructed well.	Visit us at 1