

WATER WELL RECORD Form WWC-5 KSA 82a-1212 ID No.

Form WWC-5

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CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) 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

completed on (mo/day/year) and this record is true to the best of my knowledge and belief. Kansas
Water Well Contractor's Licence No. 943 This Water Well Record was completed on (mo/day/year) _____

Water Well Contractor's Licence No. This Water Well Record was completed on (month/year)
under the business name of *Reisen - way Drilling* by (signature) *Ken Reisen*

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health.

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