WATER WELL R	ECORD	Form	WWC-5	D	ivision of W	ater		!			
Original Record		Chan	ge in Well Use		sources App			Well ID			
1 LOCATION OF W	ATER WEL	L:	Fraction		ection Num		Township Number		ge Number		
County:	DILLIDA		NW 1/NE 1/8W	14 SE 14	20	.001	T 27 S		ge Number BØE□W		
2 WELL OWNER: La Business:	ist Name: 1. In	0.01/		Street or R	ural Addrag	ce vyle	are reall is lengted (1 1 02) KIE [W		
	Dry	<i>(VOY</i>	First: HMW	direction from	n nanraat tanım	55 WIIC	ere well is located (if	unknown,	distance and		
Address: 11 10 A 101	00-1		``	direction nor	n nearest town	or inte	rsection): If at owner's	address, c	heck here:		
Address: W18 CO1	HONG	١. ـ							•		
City: And ove	2 / :	State: LS	ZIP: 107002								
3 LOCATE WELL	4 DEDTH	OF COL									
WITH "X" IN	4 DEFIN	OF CON	MPLETED WELL	• • • • • • • • • • • • • • • • • • • •	ft. 5 Lat	itude:			decimal degrees)		
SECTION BOX:	Depun(s) Gro	oundwater	Encountered: 1)	ft.	Lon	ıgitud	e:		decimal degrees)		
N	WELL'S ST	II.	3) ft., or 4)) ∐ Dry Well	Hor	izontal	Datum: ☐ WGS 84	\square NAD $\widehat{\mathfrak{e}}$	13 🗆 NAD 27		
	WELL'S STATIC WATER LEVEL: ☐ below land surface, measured on (mo-day-yr)				Sou	Source for Latitude/Longitude:					
NW N	D shove le	nd surface	, measured on (mo-da	ıy-yr)		Li or o (with matter model:					
NW NE	Pump test de	above land surface, measured on (mo-day-yr) Pump test data: Well water was				(2 20 01140104:					
w	after	valet was		☐ Land Survey ☐ Topographic Map							
W E	and	after hours pumping					Online Mapper:				
SWSE	after	after hours pumping gpm									
	Estimated Yi	eld.	anm	gpm	6 Elev	6 Elevation:ft. Ground Level TOC					
S	Bore Hole Di	iameter	gpm	ft and	Sou	rce. 🗆	Land Survey GP		nographic Man		
1 mile	Bore ridie B		in. to		304		Other	2 🗀 10	pograpine map		
1. Domestic:			star Supply: wall ID		10 🗆	OH EL	11371. 0 1 1				
Household	2. 🗆	Dewaterie	nter Supply: well ID ng: how many wells?	•••••••••••	10. ∐ (on rie	ld Water Supply: lease	·	•••••		
Lawn & Garden	7 🗆	Aquifer D	echarge: well ID	•••••		. 11016:	well ID				
Livestock	8 🗆	Monitorin	or well ID	*****************		_asea	☐ Uncased ☐ Geo	itechnical			
2. Irrigation	8. Monitoring: well ID 9. Environmental Remediation: well ID					12. Geothermal: how many bores?					
3. ☐ Feedlot		Air Sparge				Onon I	Loop Horizontal	☐ Vertic	al		
4. Industrial		Recovery		Extraction	12 🗀 (Open L	Loop Surface Disch	arge []	ing. of Water		
					13. 🔲 (Juier (specify):				
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:											
Water well disinfected? [Yes X No											
8 TYPE OF CASING USED: ☐ Steel ☑ PVC ☐ Other											
Casing diameter											
Cashig height above land surface iii. Weight lbs./it. Wall thickness or gauge No.											
TYPE OF SCREEN OR PERFORATION MATERIAL:											
	ess Steel					ther (S	specify)				
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole) SCREEN OR PERFORATION OPENINGS ARE:											
☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)											
Louvered Shutter Li Key Punched Li Wire Wrapped Raw Cut Rope (Open Hole)											
SCREEN-PERFORATED INTERVALS: From											
GRAVEL PACK INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Growt intervals: From ft. to ft. to											
Nearest source of possible	contamination	n:									
☐ Septic Tank	☐ La	ateral Line	s 🔲 Pit Privy		Livestock F	ens	☐ Insecticide	Storage			
Sewer Lines		ess Pool	☐ Sewage L	agoon [Fuel Storag	e	☐ Abandone		/ell		
☐ Watertight Sewer Line		epage Pit	☐ Feedyard] Fertilizer S	torage					
Other (Specify) Direction from well? Distance from well?											
Direction from well?			Distance from v	vell?	***********						
10 FROM TO	LI	THOLOG	GIC LOG	FROM	TO		HO. LOG (cont.) or PL	UGGING	INTERVALS		
	*	· · · · · · · · · · · · · · · · · · ·									
				1		 					
					 	 					
				Notes A	1000	000	100				
				- 1101cs. W	aised	CHS	114 64				
				-							
11 CONTRACTORIS	TO I ANDO	MATERISC	CEDTIEICATIO	N. Thin	m vvc 11						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, or plugged under my jurisdiction and was completed on (mo-day-year)											
Kansas Water Well Contr	racton's Ticen	ica dii (iii ise No	948 This W	oter Wall De	uns record	is true	e to the best of my k	nowledge	and belief.		
under the business name	of Clessic	ZHaii	erman	C:	ionature	mpiet	ca on (mo-day-year)	V. F. J J	HAVEY		
Mail I white copy alone	with a fee of \$5	.00 for eac	h constructed well to: Ka	msas Denartmen	t of Health and	1 Envir	onment Bureau of Water	GWTCC	ction		
Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.											
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015											
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