	RECORD Form WWC-5		sion of Water			
	Correction Change in Well Use	Resor	urces App. No.		Well ID	
LOCATION OF V	WATER WELL: Fraction	N/// Sect	ion Number	Township Number		
LOCATION OF WATER WELL: Fraction Section Number Township Number Range Number County: T 28 S R ME W						
2 WELL OWNER: Last Name First: Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:						
Address: 7/7 4 Grand						
Address: 71 W Grand Address: City: Haywill State: ROZIP: 67660 717 W Drainel						
3 LOCATE WELL WITH "X" IN	4 DEPTH OF COMPLETED WELL:	.40 ft.	5 Latitude:		(decimal degrees)	
SECTION BOX:	Depth(s) Groundwater Encountered: 1)	Depth(s) Groundwater Encountered: 1)				
N	2)					
	WELL'S STATIC WATER LEVEL: Source for Latitude/Longitude: GPS (unit make/model:					
NWNE	above land surface, measured on (mo-da	y-y1).:::)	
NWjNE	Pump test data: Well water was ft.			(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map		
W E	E after hours pumping gpm			. –		
SW SE	Well water was					
1 1	after hours pumping	gpm	6 Elevation	·	☐ Ground Level ☐ TOC	
S	Estimated Yield:gpm Bore Hole Diameter:in. toin. to	ft and			GPS Topographic Map	
mile	in. to	ft.		•		
7 WELL WATER TO BE USED AS:						
1. Domestic:	Dublic Water Supply: well ID				ase	
Household	6. Dewatering: how many wells?			well ID		
· F-	Hawn & Garden 7. Aquifer Recharge: well ID Cased Uncased Geotechnical					
2. Irrigation	' Livestock 8. ☐ Monitoring: well ID 12. Geothermal: how many bores? L. ☐ Irrigation 9. Environmental Remediation: well ID a) Closed Loop ☐ Horizontal ☐ Vertical					
3. Feedlot	•					
4. Industrial	Recovery Injection	Dillation				
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:						
Water well disinfected? Yes No						
8 TYPE OF CASING USED: Steel KIPVC Other CASING JOINTS: M Glued Clamped Welded Threaded						
8 TYPE OF CASING USED: Steel K PVC Other CASING JOINTS: A Glued Clamped Welded Threaded Casing diameter ft., Diameter in. to ft., Diameter ft.						
Casing height above land surface						
TYPE OF SCREEN OR PERFORATION MATERIAL: ☐ Steel ☐ Stainless Steel ☐ Fiberglass						
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)						
SCREEN OR PERFORATION OPENINGS ARE:						
☐ Continuous Slot						
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)						
SCREEN-PERFORATED INTERVALS: From						
	TCK INTERVALS: From 24 1.46					
Grout Intervals: From						
Nearest source of possible contamination:						
Septic Tank	☐ Lateral Lines ☐ Pit Privy		ivestock Pens	☐ Insectic	ide Storage	
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well						
Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well						
Direction from well? Distance from well? ft. Direction from well? TO LITHOLOGICLOG FROM TO LITHOLOGICLOG FROM TO LITHOLOGICLOG						
Direction from well?	LITHOLOGICLOG	FROM	TO LIT		PLUGGING INTERVALS	
0 8	Top See , 0	12011		Local Control of		
8 20	Fine land	2		***************************************		
20 40	Coreral ton	2				
		Notes:				
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, a reconstructed, or plugged						
under my jurisdiction and was completed on (mo-day-year)						
Kansas Water Well Co	ontractor's License No 4.2.2 This W	ater Weltzkeco	rd was comple	ted∖on (moyday-ye	ar) .2.5.7.7	
under the business nam	ne of its in the month	Market Sign	nature	King		
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						