

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

[illegible]

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 and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to **WATER WELL OWNER** and retain one for your