WATER WELL RECORD Form WWC-5 Division of Water Resources; App. No.								
1 LOC	ATION C	F WATER WELL:	Fraction		Section Number	Township Number		
County: Sumver			NW 1/4 NZ 1/4	NW 1/4	4	<u>т 30`s</u>	R EW	
Distance and direction from nearest town or city street address of well if located within city?					Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude:			
Malyane les					Longitude:			
2 WATER WELL OWNER: (4) (4) (4)					Elevation:			
RR#, St. Address, Box # : Or 9 - 10 kb s				•	Datum:			
City,	State, ZII	Code : Mali	pre Is		Data Collection	Method:		
3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL								
LOCATION WITH AN "X" IN Depth(s) Groundwater Encountered (1)								
SECTION BOX: WELL'S STATIC WATER LEVELft. below land surface measured on mo/day/yr								
N Pump test data: Well water wasft. after hours pumping							gpm	
Est. Yield Composition well water was								
							ection well	
							Specify bylow)	
sw								
	Was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yrs							
	Sample was submitted							
5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued Clamped								
i							Clamped	
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded								
PVC 4 ABS 7 Fiberglass Threaded								
Casing neight above land surface								
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify)								
2 Brass 4 Galvanized Steal 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)								
SCREEN OR PERFORATION OPENINGS ARE:								
1 Continuous slot								
2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)								
From ft. to ft., From ft. to ft.								
GRAVEL PACK INTERVALS: From ft. to 36 ft., From ft. to ft. to ft.								
From ft. to ft., From ft. to ft.								
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other								
Grout In			ft. to 20 ft., From					
What is the nearest source of possible contamination:								
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify								
	2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well below)							
Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well Direction from well? How many feet?								
FROM	TO		DLOGIC LOG	FROM	·	PLUGGING INT		
Ó	3	Top So;						
ے	10 10	Clas	<i></i>					
10	18	FINE JANG						
18	36	mid SAN	4					
							1 4	
							-	
7 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)								
Kansas Water Well Contractor's License No. 240 This Water Well Record was completed on (mo/day/year)								
under the business name of always i), ling Twe. by (signature)								
three conie	TIONS: Us	e typewriter or ball point	en. PLEASE PRESS FIRMLY as	nd PRINT clear	ly. Please fill in bla	Suite 420 Topeka Whose	orrect answers. Send top	
INSTRUCTIONS: Use typewriter or ball point Jen. PLEASE PRESSFIRMLY and PRINT clearly. Please fill in blacks, 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 records. Fee of \$5.00 for each constructed well. Visit us at								
http://www.kdhe.state.ks.us/geo/waterwells.								