

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

TMW6

1 LOCATION OF WATER WELL: County: Leavenworth	Fraction $\frac{1}{4}$ NW $\frac{1}{4}$ SE $\frac{1}{4}$	Section Number 7	Township Number T 9 S	Range Number R23 (E)W
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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: *Nothing 360,680.16*
 Longitude: *Easting 192,959.41*
 Elevation: _____
 Datum: _____
 Data Collection Method: *Land Survey*

2 WATER WELL OWNER: **VA Hospital Veteran Affairs**
 RR#, St. Address, Box # : **4101 S 4th St Trafficway**
 City, State, ZIP Code : **Leavenworth, Ks. 66048**

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

N

W	-- NW --	-- NE --	-- SW --	-- SE --	E