WATER WELL RECORD Form WWC-5				Division of Water Resources App. No.			Well ID	
Original Record Correction Change in Well Use 1 LOCATIONOF WATER WELL: Fraction					Township Numb			
County: Hodowan					17	T 22 S	R 26 □ E J E W	
2 WELL OWNER La	ist Name: Dew	10ret First:					(if unknown, distance and	
Business: 10 (100) St. (100) direction from nearest town or intersection): If at owner's address, check here:								
City: Totmonto State: KS ZIP: 67854 16 Miles West 7 3 Miles North of Jelma								
3 LOCATE WELL	1	OF COMPLET	ED WELL.	4 (ft.	5 Latitue	la.	(decimal degrees)	
WITH "X" IN					i			
SECTION BOX:		Depth(s) Groundwater Encountered: 1)				Longitude:		
N	WELL'S STA	EVEL: 25	ft.		for Latitude/Longitude			
		below land surface, measured on (mo-day-yr)				GPS (unit make/model:)		
NW NE		☐ above land surface, measured on (mo-day-yr)				(WAAS enabled? ☐ Yes ☐ No)		
		Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map		
W E	after	after hours pumping gpm				Online Mapper:		
SW SE	Well water was ft.							
	Fetimated Via	after hour pumping gpm Estimated Yield: gpm				6 Elevation:ft. ☐ Ground Level ☐ TOC		
S	Bore Hole Diameter:				Source: Land Survey GPS Topographic Map			
1 mile			☐ Other					
7 WELL WATER TO BE USED AS:								
1. Domestic:	5. Public Water Supply: well ID				10. 🔲 Oil	10. ☐ Oil Field Water Supply: lease		
☐ Household	6. Dewatering: how many wells?				11. Test Hole: well ID			
☐ Lawn & Garden	7. Aquifer Recharge: well ID					☐ Cased ☐ Uncased ☐ Geotechnical		
Livestock		8. Monitoring: well ID				12. Geothermal: how many bores?		
2. ☐ Irrigation 3. ☐ Feedlot	9. Environmental Remediation: well ID				a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water			
4. Industrial	Recovery Injection 13. Other (specify):							
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: Siegl DePVC Other								
Casing diameter in. to								
Casing height above land surface 2.4 in. Weight								
TYPE OF SCREEN OR PERFORATION MATERIAL:								
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)								
☐ 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								
GRAVEL PACK INTERVALS: From 20								
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other.								
Grout Intervals: From								
Nearest source of possible contamination:								
☐ Septic Tank		ateral Lines	☐ Pit Privy		Livestock Pens		cide Storage	
Sewer Lines		ess Pool	Sewage Lag		Fuel Storage		oned Water Well	
☐ Watertight Sewer Lin		eepage Pit	☐ Feedyard		Fertilizer Stora	<i>T</i>	ell/Gas Well	
Direction from well? Distance from well? Noue observed ft.								
10 FROM TO	, LI	THOLOGIC LO	OG	FROM			r PLUGGING INTERVALS	
0 10	Clay,					(*****)		
10 25	Sand		-1					
25 47	Shalp n	(wavel	Stronks					
	Notes:							
11 COMPLACEORS	OD LANDO	WAIEDIG OFF	TIPICATION	This	11 = 1			
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo day-year)								
Kansas Water Well Con	Kansas Water Well Contractor's License/No							
under the business name	of	ethurst.	Windows	(/		on (mo day-)		
INSTRUCTIONS: Send one copy to WATER WELL OWNER and retain one copy for your records. Submit fee of \$5.00 for each constructed well along with one (white) copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone (785) 296-3565.								

KSA 82a-1212

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Visit us at http://www.kdheks.gov/waterwell/index.html