WATER WELL RECORD Form WWC-5 Division of Water									
	☑ Original Record ☐ Correction ☐ Change in Well Use					ources App. No.		Well ID	
1 LOCA	LOCATION OF WATER WELL: Fraction					ction Number	Township Number	r Range Number	
County: STAFFORD 4584584						20	T 24 S	R /Z □ E 🛛 W	
2 WELL OWNER: Last Name: Sallabedra First: Kevin Street or Rural Address where well is located (if unknown, distance ar									
Business:	Business:					direction from nearest town or intersection): If at owner's address, check here: 3 Miles west of Stafford & 14 mile south			
Address:	Address:								
City: .	STAFFO	rd	State: /	ZIP: 67578	OF Hu	1450 A	nd on South	side of mach	
3 LOCATE WELL 4 DEPTH OF COMPLETED WELL. Ste.									
	Donth(s) Groundwater Engagements (1)								
	ON BOX:			3) ft., or_4) [Longiti	Ide: ☐ WGS 84	(decimal degrees)	
1	WELL'S STATIC WATER LEVEL:32.						or Latitude/Longitude:	03 NAD 27	
				, measured on (mo-day)	
NW	NE X			, measured on (mo-day		>	(WAAS enabled? ☐ `	Yes No)	
11				vater was		- Topograpine Map			
W	E	after		s pumpingvater was		☐ Onl	ine Mapper:		
SW	SE	after		s pumping					
		Fetimated V	Zield:	anm		6 Elevation:		ft. Ground Level TOC	
	S	Bore Hole I	Bore Hole Diameter: 9			and Source: Land Survey GPS Topographic Map			
	mile		•••	in. to	ft.		Other		
7 WELL WATER TO BE USED AS:									
1. Domestic				ter Supply: well ID			10. Oil Field Water Supply: lease		
_	Household 6. ☐ Dewatering: how many wells! Lawn & Garden 7. ☐ Aquifer Recharge: well ID					11. Test Hole: well ID			
Livest	_ 1					12. Geothermal: how many bores?			
2. Irrigat						a) Closed Loop Horizontal Vertical			
3. 🔲 Feedlo							b) Open Loop Surface Discharge Inj. of Water		
4. 🔲 Indust	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: ☐ Steel ☑ PVC ☐ Other									
Casing diameter									
Casing height above land surface									
☐ 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								ft. to ft.	
GRAVEL PACK INTERVALS: From									
9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☑ Bentonite ☐ Other									
		ole contaminati		II., FIOII	11. 10	II., FIOIII	IL. tO	п.	
⊠ -Septic			Lateral Line	es 🔲 Pit Privy		Livestock Pens	☐ Insecticio	de Storage	
☐ Sewer	Lines		Cess Pool	☐ Sewage La		on			
	ight Sewer L		Seepage Pit			Fertilizer Stora	ge 🔲 Oil Well/	/Gas Well	
☐ Other (Specify) Direction from well? Distance from well? ft.									
10 FROM	TO		LITHOLOG		FROM		ITHO LOC (cont.) or D	HICCING DITERVALO	
O	2	SAND		Set /	FROM	10 L	TIHO. LOG (cont.) of P	PLUGGING INTERVALS	
Z	24	Ta	C 1000	2011					
	70	Fine	TAN S.	and					
24 70	80	COArs		nd					
					Notes:				
		707			_				
11 0037	D. CTCT	CODY	3 E E / B F F F F F F F F F F F F F F F F F F	CEDETIC	1 00::	1			
II CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was \(\) constructed, \(\) reconstructed, or \(\) plugged									
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year). S									
under the b	usiness nan	ne of .C1.0.4	udis	water well	I. SUR.	A.	TOWNS.	u.j.::	
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

Revised 9/10/2012

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