WATER WELL R	ECORD Form WWC-5 Correction	Division of Wate Resources App. N	
LOCATION OF W	ATER WELL	Section Number	Township Number Range Number
County: 2 WELL OWNER: L	ast Name: Old all A to DEide	Street or Rural Address	T Z S R E E W where well is located (if unknown, distance and
Dusiness: direction from nearest fown or intersection)' If at owner's address, check here:			
	State: K2 ZIP: 67204	3222 6	1 Key West
City: 2 Color WELL	4 DEPTH OF COMPLETED WELL	1-2/	
WITH "X" IN SECTION BOX:	Depth(s) Groundwater Encountered: 1)	1 <i>1</i>	de: (decimal degrees) tude: (decimal degrees)
N SECTION BOX:	2) ft. 3) ft., or 4 WELL'S STATIC WATER LEVEL:	I □ Dry Well Lioning	atal Datum: DWCC 04 D NAD 02 D NAD 27
	below land surface, measured on (mo-da	y-yr) 4-5-6 Source	for <u>Latitude/Longitude</u> : S (unit make/model:)
NW NE	above land surface, measured on (mo-da Pump test data: Well water was	, , , , , , , , , , , , , , , , , , , ,	(WAAS CHADICU! I CS INO)
W E	after hours pumping	gpm	nd Survey
SW 7-SE	Well water was hours pumping	gnm mag	
	Estimated Vield grom	6 Elevat	ion:ft. ☐ Ground Level ☐ TOC : ☐ Land Survey ☐ GPS ☐ Topographic Map
mile	Bore Hole Diameter:	ft.	Other
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID			
☐Household	6. ☐ Dewatering: how many wells?	11. Test H	ole: well ID
Lawn & Garden Livestock	7. ☐ Aquifer Recharge: well ID 8. ☐ Monitoring: well ID		sed Uncased Geotechnical
2. Trrigation	9. Environmental Remediation: well	ID a) Clo	sed Loop
3. ☐ Feedlot 4. ☐ Industrial	☐ Air Sparge ☐ Soil Vapo ☐ Recovery ☐ Injection		en Loop Surface Discharge Inj. of Water ner (specify):
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:			
Water well disinfected? Yes No CASING IONITS: Welland Clamped Wolded Threeded			
8 TYPE OF CASING USED: Steel SPVC Other CASING JOINTS: Glued Clamped Welded Threaded Casing diameter in. to ft., Diameter in. to ft., Diameter in. to ft., Diameter in. to ft., Wall thickness or gauge No.			
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			
GRAVEL PACK INTERVALS: From ft. ft. from ft.			
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other			
Nearest source of possible contamination:			
☐ Septic Tank ☐ Sewer Lines	☐ Lateral Lines ☐ Pit Privy☐ Cess Pool ☐ Sewage I	agoon	☐ Abandoned Water Well
Watertight Sewer Lin Other (Specify)			age
Direction from well?	Distance from		ft.
10 FROM TO	LITHOLOGIC LOG	FROM TO I	LITHO. LOG (cont.) or PLUGGING INTERVALS
2 13	Fine lan.	sune!	
1.3 3/	Course ton	San	
		Notes	
		Notes:	
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)			
under the business name of			
Mail I white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.			
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015			