	WATER WELL RECORD Form WWC-5		Division of Water			W-II ID	
	riginal Record Correction Change in Well Use OCATION OF WATER WELL: Fraction			ources App. No ction Number	Township Number	Well ID Range Number	
Country D. // 4 // V/PVN//V			NEx. 30	13	T S	R DE WW	
2 WELL OWNER: Last Name: Smith First: Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:							
Business: direction from nearest town or intersection): If at owner's address, check her							
Address: 26 3/w 5824 m				7637W 5841-			
City: Live State: A ZIP:							
3 LOCATE WELL WITH "Y" IN 4 DEPTH OF COMPLETED WELL:							
WITH "X" IN	1						
SECTION BOX:	Depth(s) Groundwater Encountered: 1) ft. 2) ft. 3) ft., or 4) Dry Well Horizontal Datum: WGS 84 NAD 83 NAD 27						
N	WELL'S STATIC WATER LEVEL:						
M	below land surface, n	neasured on (mo-day-	yr)	// □ GP:	GPS (unit make/model:)		
NW NE	above land surface, n	easured on (mo-day-	yr)	()			
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map		
W	after hours pumping						
SW SE	after hours pumping						
	Estimated Yield: gpm				6 Elevation:		
S	Bore Hole Diameter:			Source:			
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID							
Household	6. Dewatering: how many wells?				1. Test Hole: well ID		
Lawn & Garden	7. Aquifer Recharge: well ID			☐ Cased ☐ Uncased ☐ Geotechnical			
Livestock					Geothermal: how many bores?		
2. Irrigation	9. Environmental Remediation: well ID			a) Closed Loop Horizontal Vertical			
3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Ex 4. ☐ Industrial ☐ Recovery ☐ Injection			extraction	b) Open Loop Surface Discharge Inj. of Water 13. Other (specify):			
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:							
8 TYPE OF CASING USED: Steel PVC Other							
Casing diameter							
Casing height above land surface							
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 Mill Slot Gauze Wrapped Torch Cut Drilled Holes Other (Specify)							
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)							
SCREEN-PERFORATED INTERVALS: From							
GRAVEL PACK INTERVALS: From							
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other							
Grout Intervals: From							
Nearest source of possible contamination:							
Sewer Lines Cess Pool Sewage Lagoon Fuel Storage Abandoned Water Well							
Watertight Sewer Lines							
Other (Specify)							
Direction from well?	LITHOLOGIC		FROM		THO. LOG (cont.) or PL	LIGGING INTERVALS	
C //	Top Son		TROM	10 L	ino. Lou (cont.) of FL	OGOING INTERVALS	
11 23	E ins	her may been	1				
73 40	Consul	Commence of the second					
			<u> </u>				
	Notes:						
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)							
Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo-day-year) under the business name of Signature							
under the business name	of	21		anature	with the bottom to have freed		
Mail 1 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							