WATER WELL R	RECORD Form WWC-5 Correction Change in Well Use	Division of Water Resources App. No	Well ID
1 LOCATION OF W	ATER WELL: Fraction	Section Number	Township Number Range Number
County: Salgue W. W. W. Z.5 T.27 S R E WW 2 WELL OWNER: Last Name: Heavy First: Street or Rural Address where well is located (if unknown, distance and			
Business: direction from nearest town or intersection): If at owner's address, check here:			
Address: Do Cono Johnse			
3 LOCATE WELL	State.	39	
WITH "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL Depth(s) Groundwater Encountered: 1)	ft. Longitud	decimal degrees (decimal degrees) decimal degrees (decimal degrees)
N N	2) # 3) # ~ 4	Der Well ty	tal Datum: WGS 84 NAD 83 NAD 27
	WELL'S STATIC WATER LEVEL:	(y-y1) [] GP	for Latitude/Longitude: S (unit make/model:)
NW NE	above land surface, measured on (mo-da Pump test data: Well water was	у-ут)	(WAAS enabled? ☐ Yes ☐ No)
W E	after hours pumping	gpm Donl	d Survey Topographic Map ine Mapper:
SW SE	Well water was hours pumping	onm	
	Estimated Yield:gpm Bore Hole Diameter:in. to		on:ft. ☐ Ground Level ☐ TOC ☐ Land Survey ☐ GPS ☐ Topographic Map
S mile	Bore Hole Diameter: in. to in. to	ft. and <u>source</u> . ft.	Other
7 WELL WATER TO BE USED AS:			
1. Domestic: Household	 Dewatering: how many wells? 		Field Water Supply: lease
Lawn & Garden	 7. ☐ Aquifer Recharge: well ID 8. ☐ Monitoring: well ID 		d Uncased Geotechnical
2. Irrigation	9. Environmental Remediation: well	ID a) Clos	mal: how many bores?ed Loop
3. ☐ Feedlot 4. ☐ Industrial	☐ Air Sparge ☐ Soil Vapo ☐ Recovery ☐ Injection		n Loop Surface Discharge Inj. of Water (specify):
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:			
Water well disinfected? Ti Yes 14 No			
8 TYPE OF CASING USED: Steel APVC Other			
Casing height above land surface			
TYPE OF SCREEN OR PERFORATION MATERIAL: □ Steel □ Steel □ Other (Specify)			
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)			
SCREEN OR PERFORATION OPENINGS ARE: Continuous Slot A Mill Slot Gauze Wrapped Torch Cut Drilled Holes Other (Specify)			
□ Louvered Shutter □ Key Punched □ Wire Wranged □ Saw Cut □ None (Open Hole) SCREEN-PERFORATED INTERVALS: From			
GRAVEL PACK INTERVALS: From			
9 GROUT MATERIAL: Neat cement Comment			
Grout Intervals: From			
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage			
Sewer Lines Watertight Sewer Lin	☐ Cess Pool ☐ Sewage I nes ☐ Seepage Pit ☐ Feedyard		☐ Abandoned Water Well ge ☐ Oil Well/Gas Well
Direction from well? Distance from well? ft.			
Direction from well? 10 FROM TO	_ LITHOLOGIC LOG //		ft. ITHO. LOG (cont.) or PLUGGING INTERVALS
8 4	Jop wil	0	
77 77	Comp on ten	Jana	
		Notes:	
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was A constructed, I reconstructed, or plugged under my jurisdiction and was completed on (mo day wear) and this record is true to the best of my knowledge and belief.			
under my jurisdiction and was completed on (mo day year)			
under the business name of 12000 m. Twing of 45 ignature			
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			