	RECORD Form WWC-5	Divi	sion of Water			
Original Record	Correction Change in Well Use	Resor	urces App. No.		Well ID	
1 LOCATION OF	WATER WELL: Fraction	Sect NU Sect	tion Number	Township Numb		
County: Description of the County of the Cou						
2 WELL OWNER: Last Name: K Let Jak First: Street or Rural Address where well is located (if unknown, distance and direction from peacest town or intersection). If at owner's address check here:						
unection from healest town of intersection). If at owner s address, electricity.						
Address						
City: 4 Let State: No ZIP: 6 7203						
3 LOCATE WELL	4 DEPTH OF COMPLETED WE	ell:3.8 a.	5 Latitude:		(decimal degrees)	
WITH "X" IN SECTION BOX:	Depth(s) Groundwater Encountered: 1)				(decimal degrees)	
	N 2)				4 □ NAD 83 □ NAD 27	
WELL'S STATIC WATER LEVEL:ft. Source for Latitude/Longitude:						
	below land surface, measured on (m		1 2 (,			
NW NE	NE - above land surface, measured on (mo-day-yr)			(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map		
w 194 - - - - - - - - -		Online Mapper:				
1 1 1 1 1	Well water was					
SW SE	after hours pumping		6 Flevation	. н	☐ Ground Level ☐ TOC	
S	Estimated Yield:gpm Bore Hole Diameter:in. to	16 And			GPS Topographic Map	
1 mile	Bore Hole Diameter: in. to in. to				or o obograpino map	
7 WELL WATER TO BE USED AS:						
1. Domestic:	5. ☐ Public Water Supply: well	ID	10. ☐ Oil Fie	ld Water Supply: le	ase	
☐.Household	6. ☐ Dewatering: how many we		11. Test Hole	: well ID	•••••	
Lawn & Garden	7. Aquifer Recharge: well ID		_	☐ Uncased ☐ C		
☐ Livestock	8. Monitoring: well ID			al: how many bores		
2. Irrigation	9. Environmental Remediation:	well ID		Loop Horizont	al Vertical scharge Inj. of Water	
3. ☐ Feedlot 4. ☐ Industrial	☐ Air Sparge ☐ Soil V☐ Recovery ☐ Inject				scharge [] hij. of water	
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 XPVC Other CASING JOINTS: AGlued Clamped Welded Threaded						
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:						
Septic Tank Lateral Lines Fit Privy Livestock Pens Insecticitie Storage Sewer Lines Cess Pool Sewage Lagoon Fuel Storage Abandoned Water Well						
□ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well						
Other (Specify)						
Direction nom wen	Distalle L	tom well:			Di Hoon to promovita o	
10 FROM TO	LITHOLOGIC LOG	FROM	TO LIT	HO. LOG (cont.) or	PLUGGING INTERVALS	
	1 op and the	4-1-				
1 12 13 8	- In June	James 7				
- 3 + 3 ×	Course Len	The state of the s				
		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)						
Wansas Water Wall Co	and was completed on (mo-day-year)	is Water Well-R∂co	nd was comple	ted on (mo-day-ve	ar)	
under the business nar	ontractor's License No. 77 The ne of Chandle	J. W. Sign	nature		with the same	
Mail 1 white copy a	along with a fee of \$5.00 for each constructed well	to: Kansas Department o	f Health and Envir	onment, Bureau of Wa	ter, 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						