	ATER WELL RECORD Form WWC-5 Original Record Correction Change in Well Use		Division of Water Resources App. No.			Well ID
1 LOCATION QF W	WATER WELL: Fraction .					
County: Vin	î MAM	Fraction 4 Ne 14 OW 1	4 NE1/4	22	T 28 (S)	R 🔽 □E 🛣 W
2 WELL OWNER: L	st Name:	First:	Street or Ru	rai Address v	where well is located	(if unknown, distance and
2 WELL OWNER: List Name: Business: Address: Address: Address: Address: Address: Address: Business: Address: Address: Business: Address: Address: Business: Address: Address: Address: Business: Address: Business: Address: Address: Address: Address: Business: Address: Address: Business: Busines						
Address: DD3						
City: Kinaman State: KS ZIP:67668						
3 LOCATE WELL	4 DEPTH OF COM		100 A	5 Latitu	ıde.	(decimal degrees)
WITH "X" IN	Depth(s) Groundwater			l .		(decimal degrees)
SECTION BOX:		3) ft., or, 4)		Datum: WGS 84 NAD 83 NAD 27		
	WELL'S STATIC WA				for Latitude/Longitude	
	below land surface, measured on (mo-data) NWNE Discrete land surface, measured on (mo-data) Pump test data: Well water was			r) (WAAS enabled? \(\subseteq \text{ Yes} \subseteq \text{No} \)		•
NW NE						
$ \mathbf{w} $						
SW SE	Well water was ft.					
	after hours pumping				. Ground Level TOC	
S	Bore Hole Diameter: 1.4 in. to ft. an			Source: ☐ Land Survey ☐ GPS ☐ Topographic Map		
mile		in. to			☐ Other	
7 WELL WATER TO BE USED AS:						
1. Domestic:		ater Supply: well ID			l Field Water Supply: 10 Hole: well ID	ease
☐ Household☐ Lawn & Garden		ng: how many wells? . echarge: well ID			sed Uncased U	
Livestock		g: well ID			ermal: how many bores	
2. Irrigation		al Remediation: well I			osed Loop Horizon	
3. Feedlot	☐ Air Sparg		Extraction			ischarge
4. Industrial Recovery Injection 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						
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole) SCREEN-PERFORATED INTERVALS: From						
GRAVEI PAG	ED INTERVALS: From	nπ. π. τοα	λ π., From .	π. to	π., From	ft. to ft.
GRAVEL PACK INTERVALS: From						
Grout Intervals: From						
Nearest source of possible contamination:						
Septic Tank	☐ Lateral Line	,		Livestock Per		cide Storage
☐ Sewer Lines ☐ Watertight Sewer Lin	☐ Cess Pool nes ☐ Seepage Pit	☐ Sewage L ☐ Feedyard		Fuel Storage Fertilizer Stor		oned Water Well ell/Gas Well
Other (Specify)						
Direction from well? . N	othereW/cn		vell?	ections	from well	
10 FROM TO	LITHOLO		FROM	TO	LITHO. LOG (cont.) or	PLUGGING INTERVALS
9 6	Sandy Cla		0			
6 19	Med Sand-	- With Some	fires	and		
20 84	med-San	d-Some (DINCE	Sand		
51 55	Tan Clau	, - 00000	CO-CSC.	<i></i>		
55 57	Sandy Sha	le			4	
57 60	Bed Shale	,	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)						
Kansas Water Well Cor	ntractor's License No	This W	ater Well Red	cord was con	npleted on (mo-day-y	ear) /.0/.>9././3
under the business name of						
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, Toroka, Kansas 66612, 1367, Telephone (785) 296-3565						

KSA 82a-1212

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