	WELL R		Form '	WWC-5		Divis	ion of Water				
Origina	l Record 🔲	Correction	☐ Chang	ge in Well Use		Resou	rces App. No.		Well ID		
1 LOCA	TION OF W	ATER WEI	L:	Fraction		Secti	ion Number	Township Numb	er Ran	ge Number	
	" Kinsi			14N8 4N6	15W 1/4		<i>3</i> 3	T 29 S	R /	> □ E 🔀 W	
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance an											
Business:	_).		direction f	om ne	arest town or inte	ersection): If at owner	's address,	heck here:	
Address:		k Rome			Earn		148421112	KS 2 N	orTh &	7457	
Address: 405 Dresden City: Cunningham State: KS ZIP: 67035 Address: 405 Dresden City: Cunningham State: KS ZIP: 67035											
City:	Zunn ings	im	State: KS	ZP: 67035	3/8	20:0	le TO	well			
3 LOCATE WELL ' A DEPTH OF COMPLETED WELL. 8							5 Latitude:(decimal degrees)				
WITH "	X" IN					II.					
SECTIO	N BOX:	Encountered: 1)		,,	Longitud	Longitude:					
1	1			3) ft., or 4) TER LEVEL:		l i				33 LI NAD 21	
WELL SSIAII				magnified on (ma day		3-19	Source to	Source for Latitude/Longitude: GPS (unit make/model:)			
		D shave I	below land surface, measured on (mo-day-yr). 1-23-19 above land surface, measured on (mo-day-yr)					(WAAS enabled? ☐ Yes ☐ No)			
			imp test data: Well water was ft.				,				
1 L				urs pumping gpm			☐ Land Survey ☐ Topographic Map ☐ Online Mapper:				
'' 				water was ft.			Offittle Wapper.				
I CW I CE I (urs pumpinggpm							
		Estimated V	Estimated Vield: anm				6 Elevation:ft. Ground Level TOC				
	S	Bore Hole Diameter: 19.78 in. to			ft. and		Source: Land Survey GPS Topographic Map				
mile				in. to ft.				Other			
7 WELL WATER TO BE USED AS:											
1. Domestic				ater Supply: well ID			10. □ Oil Fi	eld Water Supply: 16	ase		
				ewatering: how many wells?			Oil Field Water Supply: lease Test Hole: well ID				
. <u> </u>				Recharge: well ID				☐ Cased ☐ Uncased ☐ Geotechnical			
				ig: well ID				nal: how many bores			
2. Irrigation 9. Environmental Remediation: well 1								d Loop Horizont			
3. Feedlot Air Sparge Soil Vapor E							b) Open Loop Surface Discharge Inj. of Water				
4. Industr				13. Other (specify):							
Water well disinfected? Yes No											
8 TYPE OF CASING USED: ☐ Steel M PVC ☐ Other CASING JOINTS: ☑ Glued ☐ 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			Lateral Line			_	ivestock Pens		cide Storage	CV-11	
		_	Cess Pool	☐ Sewage L	agoon		uel Storage		oned Water	Well	
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify) □ Other (Specify)											
Direction from well? 999 Distance from well? 999 ft.											
10 FROM	TO		ITHOLO	CIC LOC	FROM	$\overline{}$		THO. LOG (cont.) or		GINTERVALS	
O	4		and &	GIC LUG	FRUI	1	10 11	THO. LOG (COIL.) OF	LUGGIN	THIRKAND	
	70	TAN S.				-					
4_		I am		And							
70	78	COArs		6		_					
78	80	Red C	LAY								
					Notes						
							_				
11 CONT	RACTOR'S	OR LAND	OWNER'	S CERTIFICATIO	N: This v	ater	well was 🗖 c	onstructed, 🔲 reco	nstructed,	or 🔲 plugged	
under my j	under my jurisdiction and was completed on (mo-day-year)										
Kansas Wa	ter Well Con	tractor's Lic	ense No	6.7.2 This W	ater Well	Reco	rd was compl	eted on (mo day-y	ear)		
under the b	usiness name	of CRAW	15 h	uter well si	IK.	Sig	nature	An-1 // //		<i>2</i>	
Mau	i white copy alo	ng with a tee of	\$5.00 for <u>ea</u>	ch constructed well to: Ka	ansas Depart	nent o	if Health and Jan	ponment, Barcan of T	and to a make a	ection,	
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.kdhcks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015											