WATER	WELL R	ECORD	Form V	WWC-5	Div	vision of Wa	ter				
				e in Well Use					Well ID		
1 LOCATION OF WATER WELL:			Fraction		ction Numb	per T	'ownship Numb	· ·	nge Number		
County: Smill  WELL OWNER: Last Name: Lattin			1/4/VW1/4 SE 1/4	SE 1/4	29		T 2 S		3 🗆 E 🗗 🔻		
2 WELL	OWNER: 1	ast Name: 🟒	attin	First: Oan				well is located			
Business: Address:			2605	OXFORD	direction from nearest town or intersection): If at owner's address, check here: \[ \[ \text{Norsh of Smith Center 4 miles, Imile west, 4 north } \]						
Address:				ŀ	west in	to Paster	• ં		.,,,,	27401 101	
City: Lawrence State: 125 ZIP: 66049											
3 LOCATE WELL WITH 47" IN 4 DEPTH OF COMPLETED WELL:											
	Denth(s) Groundwater Encountered: 1)										
	SECTION BOX: 2)										
WELL'S STATIC WA				ΓER LEVEL:			Source for Latitude/Longitude:				
				measured on (mo-day-	$\cdot$ $\Box$	GPS (unit make/model:)					
NW				measured on (mo-day-	· 1	·					
				rater was fi pumping fi			☐ Land Survey ☐ Topographic Map				
W	E	anter	Mell w		Online Mapper:						
SW	SE	after.	hours								
1 1			Yield:	8P	6 Elevation:ft. Ground Level TOC						
				in. to	Sour	Source: Land Survey GPS Topographic Map					
1 r				in. to	ft.				•••••	•••••	
7 WELL WATER TO BE USED AS:											
				ter Supply: well ID							
				g: how many wells?		11. Test Hole: well ID					
				echarge: well ID g: well ID			how many bores				
			al Remediation: well ID			oop  Horizont					
3. ☐ Feedlot ☐ Air Sparge					b) Open Loop  Surface Discharge  Inj. of Water						
4. 🔲 Industi	rial		Recovery	☐ Injection	13. 🔲 🤇	13.  Other (specify):					
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 ☐ PVC ☐ Other											
Casing diameter											
Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No											
TYPE OF SCREEN OR PERFORATION MATERIAL:											
☐ Steel       ☐ Fiberglass       ☐ PVC       ☐ Other (Specify)       ☐ Other (Specify)         ☐ Brass       ☐ Galvanized Steel       ☐ Concrete tile       ☐ None used (open hole)											
_	☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)  SCREEN OR PERFORATION OPENINGS ARE:										
l	☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)										
-		☐ Key Punc			w Cut			(Speens)			
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to							ft., From	ft. to	ft.		
G	RAVEL PA	CK INTERV	ALS: From	1 ft. to	ft., From	ft.	to	ft., From	ft. to	) ft.	
9 GROUT MATERIAL: Neat cement Cement grout Dentonite Other											
Grout Intervals: From											
		le contaminat	t <b>ion:</b> Lateral Line	n Die Deiene	_	l I ivanta alı D	) ama	□ Imagatia	cide Storage		
☐ Septic		_									
	□ Sewer Lines       □ Cess Pool       □ Sewage Lagoon       □ Fuel Storage       □ Abandoned Water Well         □ Watertight Sewer Lines       □ Seepage Pit       □ Feedyard       □ Fertilizer Storage       □ Oil Well/Gas Well										
						,		_			
Direction fro	om well?			Distance from we							
10 FROM	TO		LITHOLOG	GIC LOG	FROM	TO	<del></del>	<del></del>	<del></del>	IG INTERVALS	
0	2	+0/50			40	3			lug		
2	6		clay	× ***	3	0	10	PSOIL			
6	40	Shale					<del>                                     </del>				
							<del> </del>		· · · · · · · · · · · · · · · · · · ·		
						+	<u> </u>				
		No				Notes:					
					7						
11 CONT	RACTOR'S	OR LAND	OWNER'S	CERTIFICATION 10-day-year)	: This wate	r well was	cons	structed, 🔲 reco	onstructed,	or plugged	
under my j	urisdiction a	nd was comp	oleted on (m	no-day-year)	<i>5.y</i> and	this record	l is true 1	to the best of m	y knowled	ge and belief.	
Kansas Wa	ater Well Co	ntractor's Ly	jense No	C.C.S. Inis Wa	iter well ke	cora was co	ompieted	a on (mo-aay-y	ear) <del></del>	4.5	
UNCERTICATIONS: Send one copy to WATER WELLOWNER and retain one copy for your records. Submit fee of \$5.00 for each constructed well along with one (white) copy to Kansas											
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, Toneka, Kansas 66612-1367. Telephone (785) 296-3565.											

KSA 82a-1212

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

Revised 9/10/2012