WATER WELL RECORD	Form W	WC-5	Divi	ision of Wate:	r Resources App. N	0.	
1 LOCATION OF WATER WELL	Fraction	N. N.C.		n Number	Township No.	Range Number	
County: King Man Street/Rural Address of Well Locati	1/4 SE 1/4 NV			Positioning	T 30 S System (GPS) in	R 5 DE WW	
from nearest town or intersection: I						(in decimal degrees)	
non nourest town of intersection. If the owner is address, shock have the			Longitude:				
			Elevation:				
2 WATER WELL OWNER: Y)	inter Hay I in				4, □ NAD 83, □	] NAD 27	
2 WATER WELL OWNER: Monty Hand way RR#, Street Address, Box #: City, State, ZIP Code: 819 Park way			Collection Method:  GPS unit (Make/Model:)				
City, State, ZIP Code : 819 Vark Way			☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey				
	write, Ko		Est. Acc	curacy: $\square$ <	3 m, 3-5 m,	5-15 m, □>15 m	
3 LOCATE WELL	OF COMPLETED WEL	r S	$\circ$	ft			
	oundwater Encountered				ft. (	(3)ft.	
N WELL'S ST	TATIC WATER LEVEL	24'ft.	below la	and surface i	neasured on mo/d	lay/yr	
	Pump test data: Well water wasft. after hours pumping gpm						
EST. YIELDgpm. Well water wasft. after hours pumpinggpm							
W         E   Bore Hole L	Bore Hole Diameter						
Demostic Decodlet Doil field water supply Dewatering Other (Specify below)							
SW   SE							
Was a chemical/bacteriological sample submitted to Department? Yes X No							
S If yes, mo/day/yr sample was submitted							
Water well disinfected? X Yes No							
5 TYPE OF CASING USED: Steel PVC Other							
CASING JOINTS: Glued Clamped Welded Threaded							
Casing diameter							
Casing height above land surface							
Steel Stainless Steel YPVC Other (Specify)							
Brass Galvanized Steel None used (open hole)							
SCREEN OR PERFORATION OPENINGS ARE:  Continuous slot Child Slot Cauze wrapped Torch cut Drilled holes None (open hole)							
Louvered shutter Key punched Wire wrapped Saw cut Other (specify)							
SCREEN-PERFORATED INTERVALS: From							
From							
GRAVEL PACK INTERVAL	LS: From	ft. toZ	<i></i>	. ft., From	It.	to tt.	
6 GROUT MATERIAL: Neat	coment Coment grou	II. 10 t M Bento:	nite []	. II., FIOIII Other	It.	to ft.	
Grout Intervals: From	ft. to		ft. to	ft	From	ft. toft.	
What is the nearest source of possible				,			
	ral lines Pit privy	Livestock		Insecticide		her (specify below)	
Sewer lines Cess		☐ Fuel storag ☐ Fertilizer s		Abandone			
Watertight sewer lines Seepage pit Feedyard Fertilizer storage Oil well/gas well  Direction from well Distance from well							
	LOĢIC LOG	FROM	TO			UGGING INTERVALS	
OZ, TOP So	il						
2, 24 Clay							
	ind,						
37 80 Red S	hale						
	THE RESERVE OF THE PERSON OF T						
	<b>//</b>			· · · · · · · · · · · · · · · · · · ·			
	A PARTICIPATION OF THE PROPERTY OF THE PROPERT						
			I	p	- PANCALINA	Promis	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo/day/year) 2.1.2 and this record is true to the best of my knowledge and belief.							
under my jurisdiction and was comple Kansas Water Well Contractor's Licer	ted on (mo/day/year)	94.7.7.4.4. a Water Wall F	nd this re	cord is true	to the best of my	knowledge and belief.	
under the business name of Ca.S	isc No	water well r	by (ei	ignature)	a on Miorday/year	· · · · · · · · · · · · · · · · · · ·	
INSTRUCTIONS: Use typewriter or ball por	nt pen. <i>PLEASE PRESS FIRML</i>	Y and PRINT cl	early. Plea	ise fill in blank	s and check the goire	ect answers. Send three copies	
(white, blue, pink) to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at							
http://www.kdheks.gov/waterwell/index.html.							