	ATER WELL RECORD Form WWC-5		Division of Water Resources App. No. Well ID				
	riginal Record		Resources App. No. W				
	ATER WELL:	1/4 MW/4 MEY	1W/4 Sec		T 76 S	R 34 □ E W	
2 WELL OWNER: La Business:	st Name: Dia 2	First: Joseph	Street or Rur		where well is located		
Address: Address:		direction from nearest town or intersection): If at owner's address, check here:					
City:	State:	ZIP:	•	(45	vest of bel	14 va 1	
3 LOCATE WELL	4 DEPTH OF COM	IPLETED WELL:	507 ft.	5 Latitu	ude:	(decimal degrees)	
WITH "X" IN SECTION BOX:	Depth(s) Groundwater	ft.	Longitude:(decimal degrees)				
N	2) ft.	2) ft. 3) ft., or 4) Dry Well WELL'S STATIC WATER LEVEL: ft.			Datum: WGS 84 NAD 83 NAD 27		
7	below land surface, measured on (mo-day-ye				e for Latitude/Longitude:)	
NW NE	above land surface	-yr)	a er e (ami mane) me a en				
	Pump test data: Well v						
W	after hour Well v						
SW SE	after hours pumping gpm			6 Florestion A County and CTOC			
	Estimated Yield: 5.	6 1	6 Elevation:ft. ☐ Ground Level ☐ TOC Source: ☐ Land Survey ☐ GPS ☐ Topographic Map				
S mile	Bore Hole Diameter:			Other			
7 WELL WATER TO BE USED AS:							
1. Domestic:	5. Public Water Supply: well ID					ase	
Household Lawn & Garden	6. ☐ Dewatering: how many wells?			I1. Test Hole: well ID			
☐ Livestock	8. Monitoring: well ID			12. Geothermal: how many bores?			
2. Irrigation	9. Environmental Remediation: well ID			a) Closed Loop			
3. ☐ Feedlot4. ☐ Industrial	☐ Air Sparge ☐ Soil Vapor Extraction			b) Open Loop Surface Discharge Inj. of Water 13. Other (specify):			
Was a chemical/bacteriological sample submitted to KDHE? Yes You If yes, date sample was submitted:							
Was a chemical bacteriological sample submitted to KDHE? Yes X No 11 yes, date sample was submitted: Water well disinfected? XYes No							
8 TYPE OF CASING USED: ☐ Steel ▶ PVC ☐ Other							
Casing diameter							
Casing height above land surface							
☐ 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							
GRAVEL PACK INTERVALS: From							
9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ★Bentonite ☐ Other							
Nearest source of possible contamination:							
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage							
Sewer Lines	☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well						
Direction from well?				30	ft.	15-14-14-14-14-14-14-14-14-14-14-14-14-14-	
10 FROM TO	LITHOLO	GIC LOG	FROM	TO		PLUGGING INTERVALS	
0 10	Top soil		470	506	stone lays	41 Sand \$	
10 112	may Sand	7	770	100		V ZUNO F	
120 172	Egnela Clas	& Caliche	506	507	Reck - Ha	rel	
172 186	Clay & San	15tour layer	1 1		· · · · · · · · · · · · · · · · · · ·	-	
186 230	Sandy Clay	\$ Sand Lay +					
230 25d Med Sandar Clay Clay Clay Inter: 252 312 Sandar Clay Sting Sull Street							
312 470 my 184 low Clay & Sand							
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, \Box reconstructed, or \Box plugged							
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)							
under the business name	of	west wind	VALUE		upieted on (mo-day-ye	······································	
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, Topeka, Kansas 66612-1367. Telephone (785) 296-3565.							

KSA 82a-1212

Revised 9/10/2012

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