		RECORD		WWC-5			n of Water				
		Correction		ge in Well Use			es App. No.		Well ID		
		WATER WEI	ر نیار	Fraction WE WE	. אישע ⁽³		ו Number	Township Numb		nge Number	
Count	y: KAW		(Del)	1			<u> </u>	T \$ S		□ E X W	
2 WELL	OWNER:	Last Name:	10/220v	First: BY No				nere well is located			
Business: direction from nearest town or intersection): If at owner's address, check her Address:										check here:	
l var - ·											
City:		640	State: 人	ZIP: 6	1						
3 LOCAT	3 LOCATE WELL 4 DEPTH OF COMPLETED WELL: 3						F T - 4'4 1				
WITH "	'X" IN	Donth(a) Cr	OF CON	Encountered: 1)	· · · · · · · · · · · · · · · · · · ·	. II. :		e:			
I	ON BOX:									.(decimal degrees)	
]	N		2) ft. 3) ft., or 4) \(\subseteq WELL'S STATIC WATER LEVEL: 2. 1							NAD 27	
				, measured on (mo-da				or Latitude/Longitude		,	
1	NE			, measured on (mo-da							
17 W	NE		Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map				
w	\vdash		after hours pumping gpn				Online Mapper:				
'	! ! !		Well water was ft.								
Sw	SE		after hours pumping gpm				6 Florestions 6 Florestions				
			Estimated Yield:gpm				6 Elevation:				
	S	Bore Hole I	Bore Hole Diameter:			Source:					
1 mile in. to ft.											
7 WELL WATER TO BE USED AS:											
1. Domestic			5. Public Water Supply: well ID 6. Dewatering: how many wells?								
☐ House			7. ☐ Aquifer Recharge: well ID								
								mal: how many bores			
_	□ Livestock □ Monitoring: well ID							ed Loop			
3. Feedlot Air Sparge Soil Vapor E					, <u> </u>						
4. 🔲 Indust		☐ Recovery ☐ Injection			13. Other (specify):						
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☑ No If yes, date sample was submitted:											
Water well disinfected? \(\sum_{\text{Yes}} \sum_{\text{No}} \)											
8 TYPE OF CASING USED: ☐ Steel ☒ PVC ☐ Other											
Casing diameter											
Casing height above land surface											
		OR PERFORAT						• •			
☐ Steel	☐ Sta	ainless Steel	☐ Fiber				☐ Other	(Specify)	• • • • • • • • • • • • • • • • • • • •		
☐ Brass		lvanized Steel	☐ Conc		used (open l	iole)					
		RATION OPE									
	nuous Slot	☐ Mill Slot		auze Wrapped 🔲 🕽	Forch Cut] Drille	ed Holes [Other (Specify)		•••••	
		☐ Key Puncl			Saw Cut [
SCREEN-PERFORATED INTERVALS: From 38. ft. to 28. ft., From ft. to ft., From ft								ft.			
9 GROUT MATERIAL: ☐ Neat cement ☑ Cement grout ☐ Bentonite ☐ Other											
		⊁.∪ π. το ble contaminati		π., From	π. το	1	π., From	π. to	It.		
☐ Septic	-		on: Lateral Line	es 🔲 Pit Privy		□Live	estock Pens	□ Insection	cide Storage		
Sewer			Cess Pool	☐ Sewage I							
	ight Sewer L		Seepage Pit				ilizer Storag		di/Gas Well		
						_	_	_			
Direction fro	om well?			Distance from							
10 FROM	TO	I	ITHOLO	GIC LOG	FROM		TO LI	THO. LOG (cont.) or	: PLUGGIN	G INTERVALS	
\bigcirc	27	Top									
27	30	F1 112 30	3119								
30	34	SAIR									
34		Shale									
<u> </u>											
			Notes:								
11 CONT	DACTOR	CODIAND	MINITED SALES	CEDTIFICATIO	NI. TI.	.4 - :	.11 Aca				
II CONT	KACTOR	S OR LANDO	JWNER'S	S CERTIFICATIO	IN: This wa	ater we	ell was 🔼 🤇	constructed, \coprod reco	onstructed,	or ∐ plugged	
Kansas Wa	urisuiction iter Well Ca	anu was compl ontract or 's Lid	cicu on (1) In s e No	iu-uay-year). A.∷e - 59 % Thie W	ater Well تا	iu iiiis Pecord	was comp	rue to the best of m leted on (mo-day w	y Knowled	ge and belief.	
under the h	usiness nar	ne of	Ven 10	Teles 6	, acci VV CII F	u	was comp	u on (mo-day-y)	····	د.	
INSTRU	Kansas Water Well Contracter's License No. This Water Well Record was completed on (mo-day-year)										
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, Topcka, Kansas 66612-1367. Telephone (785) 296-3565.											

KSA 82a-1212

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