

WATER WELL RECORD Form WWC-5 1190899 Division of Water													
1	- 0	Original Record     Correction     Change in Well Use       OCATION OF WATER WELL:     Fraction						Resources App. No. Section Number Towns			Well ID Number Range Number		
-		County: $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$						$\begin{array}{c c} T & S \\ T & S \\ \end{array} \begin{array}{c} T & S \\ \end{array} \begin{array}{c} T & E \\ \Box \end{array} W$					
2	WELL Business: Address: Address: City:	OWNER:		State:	First: ZIP:		eet or Rural Address where well is located (if unknown, distance and ction from nearest town or intersection): If at owner's address, check here:						
3	LOCAT	E WELL					ft. <b>5 Latitude</b> :(decimal degrees)						
		4 DEPTH OF COMPLETED WELL: Depth(s) Groundwater Encountered: 1)											
W	SECTIO N NW SW	N NE E	2) WELL'S ST below h above ha Pump test da after	ATIC WA ATIC WA and surface, and surface, ata: Well w hours Well w	3) ft., or 4) [ TER LEVEL: , measured on (mo-day- , measured on (mo-day- vater was fi pumping yater was f pumping	Dry Wel ft. .yr) yr) t. gpm t.	Longitude:						
		Estimated Yield:gpm						6 Elevation:ft. Ground Level TOC					
	-	S	Bore Hole I		in. to ft. and			Source:  Land Survey  GPS  Topographic Map					
	1 n				in. to	ft.	. ft. 🗌 Other						
1. 2. 3.	Domestic: Housel Lawn d Livesto Irrigati Feedlo	nold & Garden ock on t	6. [ 7. [ 8. [ 9. Eı	) Extraction	 	<ul> <li>10. Oil Field Water Supply: lease</li> <li>11. Test Hole: well ID</li> <li>Cased Ducased Geotechnical</li> <li>12. Geothermal: how many bores?</li> <li>a) Closed Loop Horizontal Vertical</li> <li>b) Open Loop Surface Discharge Inj. of Water</li> <li>12. Other (croasify);</li> </ul>							
	4. Industrial       Recovery       Injection       13. Other (specify):         Was a chemical/bacteriological sample submitted to KDHE? Yes												
						res 🗆 r		n yes, dat	e sai	npie was submitted:	•••••		
	Water well disinfected?       Yes       No         8 TYPE OF CASING USED:       Steel       PVC       Other       CASING JOINTS:       Glued       Clamped       Welded       Threaded												
Ca Ca T` S(	Casing diameterin. toft., Diameterin. toft., Diameterin. toft.         Casing height above land surfacein. Weight												
					n ft. to								
					Cement grout $\square$ Be								
Grout Intervals:       From													
	FROM	TO		ITHOLOG		FROM		ТО	LIT	HO. LOG (cont.) or Pl	LUGGIN	GINTERVALS	
_ 3					W								
						-							
						+							
						+	-+						
						Notes:	<u> </u>		<u> </u>				
un Ka	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) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No This Water Well Record was completed on (mo-day-year) under the business name of												
	Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. KS Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-3565.												
			neks.gov/waterwel		. , ,		-	- ,	1			A 82a-1212	