

WATER WELL RECORD Form WWC-5 1107998 Division of Water Resources App. No. Well ID Well ID													
1		Original Record Correction Change in Well Use OCATION OF WATER WELL: Fraction					Resources App. No. Section Number Township Nu			Township Number		ge Number	
-		County: $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$						$\begin{array}{c c} T & S \\ \hline T & S \\ \hline R & \Box E \Box W \\ \hline \end{array}$					
2	WELL Business: Address: Address: City:	OWNER:		State:			reet or Rural Address where well is located (if unknown, distance and rection from nearest town or intersection): If at owner's address, check here:						
3	LOCAT	E WELL											
		4 DEPTH OF COMPLETED WELL: Depth(s) Groundwater Encountered: 1)											
W	SECTIO N NW SW	N NE E	TATIC WA and surface and surface, ata: Well w hours Well w hours	Dry Wel ft. .yr) yr) t. gpm t.		Longitude:							
					6 Elevation:ft. □ Ground Level □ TOC Source: □ Land Survey □ GPS □ Topographic Map								
					in. to ft. and in. to ft.			<u>Source</u> : Land Survey GPS 10pographic Map					
7 1.	WELL V Domestic: Housel	WATER T nold & Garden ock	TER TO BE USED AS: 5. Public Water Supply: well ID 6. Dewatering: how many wells? rden 7. Aquifer Recharge: well ID 8. Monitoring: well ID Monitoring: well ID Public Water Supply: well ID Public Water Supply: well ID Monitoring: well ID						 10. □ Oil Field Water Supply: lease 11. Test Hole: well ID □ Cased □ Uncased □ Geotechnical 12. Geothermal: how many bores? 				
	☐ Irrigati ☐ Feedlo		Air Sparge	al Remediation: well ID		••••	a) Closed Loop Horizontal Vertical b) Open Loop Surface Discharge Inj. of Water						
	Industr		Recovery	LATACTION		13. Other (specify):							
W	4. Industrial Recovery Injection 13. Other (specify): Was a chemical/bacteriological sample submitted to KDHE? Yes												
	Water well disinfected? Yes No												
Ca Ca T S	8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded Casing diameter in. to ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface in. to in. Weight lbs./ft. Wall thickness or gauge No. ft. TYPE OF SCREEN OR PERFORATION MATERIAL:												
	GRAVEL PACK INTERVALS: From												
Grout Intervals: From													
	FROM	TO		ITHOLOG		FROM		ТО	LIT	HO. LOG (cont.) or Pl	LUGGIN	GINTERVALS	
					-			-					
							-+						
						Notes:	(
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)												
			and Environment	, Bureau of V	Vater, Geology Section, 10								
	V1s1t us at <u>h</u>	ttp://www.kdł	neks.gov/waterwel	I/1ndex.html							KS	A 82a-1212	