

CORRECTION(S) TO WATER WELL RECORD (WWC-5)
(to rectify lacking or incorrect information)

County: Reno

Location listed as:

Location changed to:

Section-Township-Range: 7-21S-8W

6-22S-8W

Fraction ($\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$): NE SE SE

NE SE SE NE

Other changes: Initial statements: No Datum Given

Changed to: NAD 27

Comments: _____

verification method: Written description, area road map, latitude & longitude, KGS' "LEO" conversion tool, and mapping tool & aerial photo on KGS website. initials: DRB date: 9/30/2009

submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3726
to: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367.

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: Bite Reno Fraction: NE 1/4 SE 1/4 SE 1/4 Section Number: 07 Township Number: T 21 S Range Number: R 08 E/W

Distance and direction from nearest town or city street address of well if located within city? at owner's address

Global Positioning Systems (decimal degrees, min. of 4 digits)
Latitude: 38.167743
Longitude: -98.234536
Elevation: _____
Datum: _____
Data Collection Method: _____

2 WATER WELL OWNER: Duane Kruger
RR#, St. Address, Box #: 10309 N. Peace Rd
City, State, ZIP Code: Sterling KS 67579

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

-- NW --		-- NE --	
-- SW --		-- SE --	

N
W E
S

4 DEPTH OF COMPLETED WELL _____ ft.

Depth(s) Groundwater Encountered (1) _____ ft. (2) _____ ft. (3) _____ ft.
WELL'S STATIC WATER LEVEL _____ ft. below land surface measured on mo/day/yr. _____
Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well Geoth.

Was a chemical/bacteriological sample submitted to Department? Yes _____ No _____; If yes, mo/day/yr
Sample was submitted _____ Water well disinfected? Yes _____ No _____

5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____
2 PVC 4 ABS 7 Fiberglass None Threaded _____

Blank casing diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft.
Casing height above land surface _____ in., Weight _____ lbs./ft. Wall thickness or guage No. _____

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify) _____
2 Brass 4 Galvanized Steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot 3 Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)
2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw cut 10 Other (specify) _____

SCREEN-PERFORATED INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.
GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.
From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____
Grout Intervals: From 250 ft. to 0 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination:

1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide storage 16 Other (specify)
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well below
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/gas well

Direction from well? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	10	Black Clay			
10	40	Brown clay			
40	100	water sand			
100	230	Red clay			
230	250	Blue shale			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 6/1/09 and this record is true to the best of my knowledge and belief.
Kansas Water Well Contractor's License No. 765 This Water Well Record was completed on (mo/day/year) 6/1/09
under the business name of Environmental Loop Service by (signature) Keith Hunter

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at <http://www.kdheks.gov/waterwell/index.html>.