

County: Reno Fraction NW NW NE NW Sec. 34 T 22 S R 9 E (W)

**CORRECTION(S) TO WATER WELL COMPLETION RECORD (WWC-5)**

(to rectify lacking or incorrect information)

Owner: Robert Farney

Location was listed as:

Section-Township-Range: 34-22 S-9 E

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

Location changed to:

34-22 S-9 W

NW NW NE NW

Other changes: Initial statements: \_\_\_\_\_

Changed to: \_\_\_\_\_

Comments: \_\_\_\_\_

Verification method: Well site address, area road map, Reno  
County online parcel search, and mapping tool & aerial  
photos on KGS website. initials: DR date: 11/4/2013

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 - *Plugged* Form WWC-5

Division of Water Resources App. No.

|   |  |   |  |  |  |
|---|--|---|--|--|--|
| <b>1 LOCATION OF WATER WELL:</b><br>County: <u>RENO</u> Fraction <u>NE 1/4</u> 1/4    1/4    1/4<br>Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input checked="" type="checkbox"/><br><u>25809 W. 43rd</u><br><u>STERLING KANSAS 67579</u>  |  | <b>Section Number</b> <u>34</u> <b>Township No.</b> <u>T 22 S</u> <b>Range Number</b> <u>R 9</u> <input checked="" type="checkbox"/> E <input type="checkbox"/> W<br><b>Global Positioning System (GPS) information:</b><br>Latitude: ..... (in decimal degrees)<br>Longitude: ..... (in decimal degrees)<br>Elevation: .....<br>Datum: <input type="checkbox"/> WGS 84, <input type="checkbox"/> NAD 83, <input type="checkbox"/> NAD 27<br>Collection Method:<br><input type="checkbox"/> GPS unit (Make/Model: .....)<br><input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey<br>Est. Accuracy: <input type="checkbox"/> <3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> >15 m |  |  |  |
| <b>2 WATER WELL OWNER:</b><br>RR#, Street Address, Box #: <u>25809 W. 43rd</u><br>City, State, ZIP Code: <u>STERLING KS. 67579</u>  |  | <b>3 LOCATE WELL WITH AN "X" IN SECTION BOX:</b><br><div style="text-align: center;"> </div> <p style="text-align: center;">S<br/>-----1 mile-----</p>  |  | <b>4 DEPTH OF COMPLETED WELL</b> ..... <u>80</u> ft.<br>Depth(s) Groundwater Encountered (1)..... <u>40</u> ft. (2)..... ft. (3)..... ft.<br>WELL'S STATIC WATER LEVEL..... <u>35</u> ft. below land surface measured on mo/day/yr.....<br>Pump test data: Well water was <u>60</u> ft. after ..... hours pumping..... gpm<br>EST. YIELD..... gpm. Well water was <u>NOT KNOWN</u> ft. after ..... hours pumping..... gpm<br>Bore Hole Diameter ..... in. to ..... ft. and ..... in. to ..... ft.<br>WELL WATER TO BE USED AS: <input type="checkbox"/> Public water supply <input type="checkbox"/> Geothermal <input type="checkbox"/> Injection well<br><input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Feedlot <input type="checkbox"/> Oil field water supply <input type="checkbox"/> Dewatering <input type="checkbox"/> Other (Specify below)<br><input type="checkbox"/> Irrigation <input type="checkbox"/> Industrial <input checked="" type="checkbox"/> Domestic-lawn & garden <input type="checkbox"/> Monitoring well<br>Was a chemical/bacteriological sample submitted to Department? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If yes, mo/day/yr sample was submitted.....<br>Water well disinfected? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |  |
| <b>5 TYPE OF CASING USED:</b> <input type="checkbox"/> Steel <input type="checkbox"/> PVC <input type="checkbox"/> Other <u>Galv. Steel</u><br>CASING JOINTS: <input type="checkbox"/> Glued <input type="checkbox"/> Clamped <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Threaded<br>Casing diameter ..... <u>6</u> in. to ..... <u>80</u> ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.<br>Casing height above land surface..... in., Weight ..... lbs./ft., Wall thickness or gauge No. <u>DO NOT KNOW</u><br>TYPE OF SCREEN OR PERFORATION MATERIAL:<br><input type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input type="checkbox"/> PVC <input type="checkbox"/> Other (Specify) .....<br><input type="checkbox"/> Brass <input checked="" type="checkbox"/> Galvanized Steel <input type="checkbox"/> None used (open hole)<br>SCREEN OR PERFORATION OPENINGS ARE:<br><input type="checkbox"/> Continuous slot <input checked="" type="checkbox"/> Mill slot <input type="checkbox"/> Gauze wrapped <input type="checkbox"/> Torch cut <input type="checkbox"/> Drilled holes <input type="checkbox"/> None (open hole)<br><input type="checkbox"/> Louvered shutter <input type="checkbox"/> Key punched <input type="checkbox"/> Wire wrapped <input type="checkbox"/> Saw cut <input type="checkbox"/> Other (specify) .....<br>SCREEN-PERFORATED INTERVALS: From <u>60 to 80</u> ft. to ..... ft., From ..... ft. to ..... ft.<br>GRAVEL PACK INTERVALS: From <u>(Do Not Know)</u> ft. to ..... ft., From ..... ft. to ..... ft.<br><b>6 GROUT MATERIAL:</b> <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other .....<br>Grout Intervals: From ..... ft. to ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.<br>What is the nearest source of possible contamination:<br><input type="checkbox"/> Septic tank <input type="checkbox"/> Lateral lines <input type="checkbox"/> Pit privy <input type="checkbox"/> Livestock pens <input type="checkbox"/> Insecticide storage <input type="checkbox"/> Other (specify below)<br><input type="checkbox"/> Sewer lines <input type="checkbox"/> Cesspool <input type="checkbox"/> Sewage lagoon <input type="checkbox"/> Fuel storage <input type="checkbox"/> Abandoned water well<br><input type="checkbox"/> Watertight sewer lines <input type="checkbox"/> Seepage pit <input checked="" type="checkbox"/> Feedyard <input type="checkbox"/> Fertilizer storage <input type="checkbox"/> Oil well/gas well<br>Direction from well ..... <u>1/4 mile WEST</u> Distance from well ..... <u>1/4 mile</u> |  |   |  |  |  |
| FROM TO LITHOLOGIC LOG<br><div style="border: 1px solid black; padding: 10px; text-align: center; margin: 10px;"> <u>(Do Not Know)</u> </div>   |  | FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS<br><div style="border: 1px solid black; padding: 10px; text-align: center; margin: 10px;"> <u>V</u> </div>   |  |  |  |
| <u>6-28-2013 - I plugged this well using: 1 gallon bleach to sand.</u><br><u>- sand filled to 14 ft. then 1 gal bleach.</u><br><u>- then bentonite grout to 12 ft. capped</u><br><u>with 6 in. thick cement cap is 4 ft.</u><br><u>below ground level</u>   |  |   |  |  |  |
| <b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was <input type="checkbox"/> constructed, <input type="checkbox"/> reconstructed, or <input checked="" type="checkbox"/> plugged under my jurisdiction and was completed on (mo/day/year) <u>6-30-13</u> and this record is true to the best of my knowledge and belief.<br>Kansas Water Well Contractor's License No. .... This Water Well Record was completed on (mo/day/year) <u>about 1952</u><br>under the business name of <u>ROBERT L. FARNEY</u> by (signature) <u>Robert L. Farney</u>  |  |   |  |  |  |
| <b>INSTRUCTIONS:</b> Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks and check the correct answers. Send one copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1366<br>Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at <a href="http://www.kdheks.gov/waterwell/index.html">http://www.kdheks.gov/waterwell/index.html</a>   |  |   |  |  |  |