

County: Reno Fraction: SE SE NE Sec. 29 T. 22 S R. 4 W

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

Owner: Floyd Redd

If location corrected, was listed as:

Section-Township-Range: 29-23-4W

Location changed to:

29-22-4W

Fraction (1/4 calls): _____

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

Verification method: Per email from David Randolph GMD and KGS mapper

Initials: SH Date: 03-25-2020

Submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3724
 Kansas Dept. of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367

1 LOCATION OF WATER WELL: County: Reno Fraction: SE 1/4 SE 1/4 NE 1/4 Section Number: 29 Township Number: T 23 S Range Number: R 4 E

Distance and direction from nearest town or city street address of well if located within city?
2 mi S of Buhler - 5011 Buhler Rd

2 WATER WELL OWNER: Floyd Redd
 RR#, St. Address, Box #: 5115 N Buhler Rd
 City, State, ZIP Code: Buhler, KS 67522
 Board of Agriculture, Division of Water Resources
 Application Number:

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

N	
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NW	NE
---	---
W	X
---	---
SW	SE
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S	

4 DEPTH OF COMPLETED WELL: 50 ft. ELEVATION: _____

Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.
 WELL'S STATIC WATER LEVEL 1.0 ft. below land surface measured on mo/day/yr 4-7-04
 Pump test data: Well water was 4.8 ft. after 1 hours pumping 2.0 gpm
 Est. Yield 2.0 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 WELL WATER TO BE USED AS:
 Domestic 3 Feedlot 6 Oil field water supply 8 Air conditioning 11 Injection well
 Irrigation 4 Industrial 7 Domestic (lawn & garden) 9 Dewatering 12 Other (Specify below)

Was a chemical/bacteriological sample submitted to Department? Yes _____ No X; If yes, mo/day/yr sample was submitted
 Water Well Disinfected? Yes No

5 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued X Clamped _____
 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____
 7 Fiberglass Threaded _____

Blank casing diameter 5 in. to 30 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface 36 in., weight 2.29 lbs./ft. Wall thickness or gauge No. 160

TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless Steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-Cement
 2 Brass 4 Galvanized Steel 6 Concrete tile 9 ABS 11 Other (Specify) _____
 12 None used (open hole)

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

SCREEN-PERFORATED INTERVALS: From 30 ft. to 50 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 22 ft. to 55 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 2 ft. to 22 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 14 Abandoned water well
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)
 13 Insecticide storage

Direction from well? W How many feet? 200

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	F Sand			
1	19	Br + Gr Clay			
19	50	F Sand + sm layers Clay			
50	55	Gr Clay			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 4-7-04 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No 447 This Water Well Record was completed on (mo/day/yr) 5-4-04 under the business name of Miller Drilling by (signature) E Miller

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.