48	7 76	72 WA	ATER WELL RE	CORD	Form	WWC-	5 KS/	A 82a-1	212 ID N	o. Well	#3				
1 LOCAT	ION OF WA	ATER WELL:	Fraction					Section			nship Nu	ımber	R	ange Nui	mber
County:	Reno		NE 1	/4 NE	1/4	SW	1/4	S	•	Т	23	s	R	4	E (W
Distance a	and directio	n from nearest t	town or city stre	et addres	ss of wel	II if loca	ted within	city?							
		miles east of H													
2 WATER	WELL OW	VNER: Integra Com	mercial Realty LLC												
RR#, St. A	Address, Bo , ZIP Code	x # .c/o Lane Nev 8846 East Di Scottsdale, A	ville iamond Rim Drive Arizona 85255									culture, D umber: 4		of Water	r Resources
3 LOCAT	e well's l	OCATION WITH	4 DEPTH OF	COMPL	ETED W	/ELL	137	ft	. ELEVAT	ION: un	known				
AN "X"	IN SECTION	N BOX:	Depth(s) Grou									ft. 3			, ft.
 			WELL'S STATI			- 5	1 ft. b	elow lan	d surface	measure	d on mo/o	day/yr 5-1	8-05		
	Ana.		Pu	mp test	data: We	ell wate	rwas	lot check	ked ft. af	ter		. hours p	umping	J	gpm
-	- NW	NE	Est. Yield un	known	gpm: We	ell water	was		ft. af	ter		. hours p	umping		gpm
M Mile	i	iE	Bore Hole Diar	meter	38	in. to		136	ft., aı	nd			in. to		ft.
- W	ı x	!	WELL WATER	TO BE USE	ED AS:	5	Public wate	er supply	8	Air cond	litioning	11	Injed	ction well	
$ \ \ _{-}$	-sw	SE	1 Domestic	3 F	eedlot	6	Oil field wa	ter supply	/ 9	Dewate	ring	12	2 Othe	er (specify	below)
	1	1	2 Irrigation	4 Ir	ndustrial	7	Domestic (lawn & ga	arden) 1	0 Monitor	ing well				
<u>*</u>		l .	Was a chemical	/bacteriol	ogical sa	mple sul	omitted to	Departm	ent? Yes_	N	。 √	If yes, me	o/day/y	rs samp	le was sub
	- 5		mitted						Water	Well Disi	nfected?	Yes			
	OF BLANK	CASING USED:		5 Wrou	ight iron			crete tile				NTS: Glue		Clamp	ed
Steel		3 RMP (SR)		6 Asbe	stos-Cem	ent	9 Othe	er (specify	below)	В	olted		ed		
2) PVC		4 ABS		7 Fibe	rglass							Threa	ided		
	-	er 12 3/4 (stee		30			2 3/4				Dia		in. to		f:
Casing he	eight above	land surface	24	in., weig	ht 4	9.56 (st			lbs./f	t. Wall thi	ckness o	r gauge No	.375	(steel) .4	420 (PVC)
			TION MATERIA				7 PVC					stos-cemen			
1 Stee	el	(3) Stainless	steel	5 Fibe	erglass		8 RMF	P (SR)			11 Other	(specify)			
2 Bras		4 Galvanize		6 Con	crete tile		9 ABS	;				used (open			
_		ORATION OPE				ızed wra				8 Saw		11	None (o	pen hole)	
_	ntinuous slot	\sim	Mill slot			e wrappe	d			9 Drille					
	vered shutter		Key punched From	40 60	7 Tord	ch cut ft. to	60 (PV		ft Erom		r (specify)	ft. to			ft.
301	REEN-PERFUR	ATED INTERVALS:	From	70		t. to	70 (S.S 90 (PV)		ft., From ft., From		90 110	ft. to		110 (S.S 135 (PVC	
	GRAVEL	. PACK INTERVAL				t. to			ft., From		1 10	ft. to			ft
									ft., From			ft. to			ft.
6 GRO	UT MATER	IAI: 1 Nost	cement (2) Cen			Bentonite			1 0	than Pa	ntanita Hal				
Onto	Compacted		•	_						ther Be	ntonite no	epiug			
	ervals: Fro		ft. to 5		ft., From	n 	5	ft. to	25	ft., F	rom	25	ft. to	30	ft.
What is the nearest source of possible contamination: 10 Livestock pens 14 Abandoned									11						
1 Sept	tic tank	4			7 Pit	privy		11 Fue	el storage			15 Oil	well/Gas	well	
2 Sew			Cess pool			wage lag	oon		tilizer stora	-			er (spec	cify below))
3 Wate	ertight sewer	lines 6	Seepage pit		9 Fee	edyard		13 Inse	ecticide sto	rage	None i	known			
Direction f	from well?							He	ow many t	feet?					
FROM	ТО	L	LITHOLOGIC L	og			FROM	To	0		PLUC	GING IN	ΓERVA	LS	
0	1	Topsoil													
1	6	Sand, very fin	e										_		
6	11	Clay, sandy w				,									
11	39	Sand, very fin													
39	52		ith sand, very fir	ne				_							
52	107	Sand, very fin													
107	120	Sand, very fin												-	
120	136	Clay, sandy w	ith sand, very fir	ne											

	<u> </u>							_							
							-1-75	-							
								+		.,,					
7															
4 CONTRA	ACTOR'S OR	LANDOWNER'S	CERTIFICATION:	This water	r well was	(1) co	nstructed) , (2) r	reconstruct	ed , or	(3) plugge	d und	er my ju	risdiction a	and was
completed	on (mo/day	/year)		5/18/05				and th				of my kno	wledge	and beli	ief. Kansas
		's License No	185		This Wa	ater We	II Record	was com	npleted on	-	/ //	01	6-1	Ø5	
		Clarke W	eli & Equipment		DAIT.	. Di	11-11-1			gnature) <	erun	y w	· Cld	1	
INSTRUCT	IUNS: Use types	writer or ball point pen	PLEASE PRESS FIR	(MIY and PF	VIN I clearly	/ Please fil	i in hlanks iii	nderline or d	circle the corr	ert answers	Send ton the	ree conies to k	ansas De	nartment of	Health and