CORRECTION(S) TO WATER WELL RECORD (WWC-5)					
(to rectify lacking or incorrec	t information)				
	County: Reno				
Location listed as:	Location changed to:				
Section-Township-Range: None Given Fraction (1/4 1/4 1/4):	5-235-5W				
Fraction (1/4 1/4 1/4):	SE SW SE NW				
Other changes: Initial statements:	-				
Changed to:					
Comments:					
Comments.	· · · · · · · · · · · · · · · · · · ·				
verification method: <u>Latitude</u> & longitude, KGS	"LED" conversion tool,				
well owner's address, area road	map, and mapping tool \$				
verification method: Latitude & longitude, KGS' LEO' Conversion tool, well owner's address, area road map, and mapping tool & aerial photo on KGS website. initials: DRL date: 1/27/2009					
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 W	ater Resources; App. No.	
1 LOCATION OF WATER WELL:	ı	Section Number	Township Number	Range Number
County: Ken	1/4 1/4	1/4	T S	R E/W
Distance and direction from nearest to	own or city street address of we	ll if Global Positioni	ng Systems (decimal deg	rees, min. of 4 digits)
located within city?		Latitude: N 3	$\Delta m^2 + 4 \Delta m$	<i>1</i> .
2 WATER WELL OWNER, Sico	2 7 210C1 -024 LC	Longitude: L	1970 531 40	1.4"
2 WATER WELL OWNER: Str		Elevation:		
C' C' TIP C 1	E 2359	Datum:	70.00	
מאט	ninson, KS 67501	Data Collectio		
	F COMPLETED WELL		ft.	
LOCATION		0 (0)	6 (2)	
WITH AN "X" IN Depth(s) Gro SECTION BOX: WELL'S STA	undwater Encount ned (1) ATIC WATER LEVEL	ft. (2)	ft. (3)	ft.
N Pumr	test data: Well water was	ft after	hours numning	/yr
Est Yield	gpm: Well water was	ft after	hours numping	gpm
WEILWAT	ER TO BE USED AS: 5 Public	c water supply 8 A	ir conditioning 11 Ini	ection well
W NW NE E 1 Domestic	3 Feedlot 6 Oil field	water supply 9 D		her (Specify below)
2 Irrigation		(lawn & garden) 10 M		
SW SE			90	thermal
Was a chemic	cal/bacteriological sample subm			
Sample was s	submitted	Water well disinfected	d? Yes No	
S				
5 TYPE OF CASING USED: 1 5/	Wyought Iron 8 Concr		NG JOINTS: Glued	Clamped
		(specify below)		
2 PVC 4 ABS $/ \bigcirc / \uparrow \text{ I}$				L
Blank casing diameter in. to				
Casing height above land surface		lbs./ft. Wall t	hickness or guage No	
TYPE OF SCREEN OR PENFORATION 1 Steel 3 Stainless Steel	N MATERIAL: 5 Fiberglass 7 PVC	9 ABS	11 Othor (Specify)	
2 Brass 4 Galvanized Steal			11 Other (Specify) 12 None used (open	
SCREEN OR PERFORATION OPENIN	IGS ARE:	10 Asocsios-Cemen	. 12 None used (open	noic)
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				
From				
GRAVEL PACK INTERVALS: From				
	From ft. to	ft., From	ft. to	ft.
6 GROUT MATERIAL: 1 Neat cer	nent 2 Cement grout 3 Ben	tonite 4 Other		
Grout Intervals: From 30.5	ft to 5 ft. From	ft. to	. ft From	ft. toft.
Grout Intervals: From 355 ft. to ft., From ft. to ft., From ft. ft. to ft. ft. to ft. ft. to ft. ft. ft. ft. ft. ft. ft. ft.				
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 1	1 Fuel storage 14	Abandoned water well-	below)
3 Watertight sewer lines 6 Seep			Oil well/gas well	House
Direction from well?		ow many feet?		
	OLOGIC LOG	FROM TO	PLUGGING INT	ERVALS
0 10 Barrelau				
10 65 Caray Shale				
LAS 85 Red Clay				
35 90 Blue Shall				
220 305 Brown Clar				
7 CONTRACTOR'S OR LANDOWN	ER'S CERTIFICATION: TH	is water well was (1) cor	structed. (2) reconstruct	ted. or (3) plugged
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 (no day/sear)				
Kansas Water Well Contractor's License No				
Kansas Water Well Contractor's License No				
INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> 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.				