County: Reno	Fraction:	NW	_ Sec	20	Т_	25	_s	R	9	_ E/W
CORREC	CTION(S) TO WATER (to rectify lacki				RD (W	WC-5)				
Owner: Preisser, Larry		, 5		,						
Location was listed as:	Location changed to:									
Section-Township-Range:	20 - 27 S - 9W		20 - 25 S - 9W							
Fraction (1/4 1/4 1/4):	NW		20 - 25 S - 9W							
Other changes: Initial statements:						·				
Changed to:										
Comments:										
Verification method: wwcs	tabase to find w	ell #3 Mc	1 225	Drilled	the	Same	: De	y.,	Chan	y ed
Township to 25 and Roc	ed intersation mat	lehed.						-		
				in	itials:	DF_	date:	_4	115/	4
Submitted by: Kansas Geological S to: Kansas Dept of Health & Enviro				/e., Lawre	nce K	S 66047	7-3726	5		

1	C
1	7

WATER W	ELL RECORD	Form W	WC-5	Div	vision of Water	Resources App. No	329.19			
	ON OF WATER WELL:	Fraction		Section	on Number	I ownship No.	Range Number			
	* Rena	1/4 1/4	1/4 NW 1/4		20	T 27 S	R9 □E 🗹 W			
	l Address of Well Location;					System (GPS) in				
	st town or intersection: If at	owner's address, check		Latitude: (in decimal degrees)						
S Landon	Rd & Castleton	(41 ~				(in decimal degrees)			
		Well	H-7							
2 WATER	WELL OWNER: Larry Pr	oinner				, 🔲 NAD 83, 🖼	NAD 27			
	- Laily 1	130th Ave			tion Method:	-/Model:)			
							Map, Land Survey			
	Curining	ham, KS 67035				3 m, □ 3-5 m, □				
3 LOCATE V	VELL				,					
WITH AN	'X" IN 4 DEPTH OF	COMPLETED WEL	L .7.9		ft.	**,				
SECTION	OX: Depth(s) Groundwater Encountered (1).15 ft. (2) ft. (3) ft.									
N	WELL'S STAT	WELL'S STATIC WATER LEVEL ft. below land surface measured on mo/day/yr								
	Pump	Pump test data: Well water was								
	NE EST. YIELD. RU	Wgpm. Well water	r was	tt.	after	hours pump	oing gpm			
w	Bore Hole Diameter 40									
	□ D	Feedlot					Other (Specify below)			
sw	- SE Donlestic Irrigation	☐ Industrial ☐								
		bacteriological sample	Domestic-la	o Depart	ment?	Zes V No				
s		day/yr sample was sub				ics El No				
1 mile		fected? W Yes								
5 TYPE OF										
	CASING USED: Stee				•••••	••••				
Casing dian	NTS: Dued Clar neter 16in. to 70	nped weided	☐ I nreade	a ••	A D:		in to 6			
Casing diam	ht above land surface12	II., Diameter	16	1ba /f	II., DI	knoss or gauge No	SCH40			
TVDE OF SC	REEN OR PERFORATION	m., weight	.! 🗙	108./10	, wan inici	kness or gauge No)			
	Stainless Steel	PVC	Г	Other (S	necific)	. •2				
Brass	Galvanized Steel		ole)	_ Outer (S	pecity)	• • • • • • • • • • • • • • • • • • • •				
SCREEN OR	PERFORATION OPENING		,							
	nuous slot			☐ Dril	lled holes	None (open hole	;)			
	red shutter		Saw cut							
SCREEN-PE	RFORATED INTERVALS:									
CD.	TIPL BACK DIFFERENCES	From	ft. to		. ft., From	ft. t	o ft.			
GRA	VEL PACK INTERVALS:									
6 CROUT M	ATERIAL . DN	From	tt. to	····	. It., From	n. t	o ft.			
Grout Interval	ATERIAL: Neat cemes s: From 3 ft. to	20 Cement grout	≥ Bento	nite _	Otner		Α			
	arest source of possible conta	mination:	l	π. το	It.,	riolli	11. 10			
Septic			Livestock	nens	☐ Insecticide	storage M Othe	er (specify below)			
☐ Sewer		Sewage lagoon	Fuel storage	•	Abandoned	water well	, , ,			
☐ Water	tight sewer lines	it Feedyard	Fertilizer s		Oil well/gas					
	om well Southwest		Distance	from we	1125					
FROM TO	LITHOLOG	IC LOG	FROM	TO		G (cont.) or PLU	GGING INTERVALS			
0 2	Sandy Topsoil			70	Good Sand					
2 5	Clay		70		Red Bed					
5 16	Sand & Gravel									
16 18	Clay				** .	***************************************				
18 48	Good Sand & Gravel				-					
48 49	Clay									
49 51	Sand						<u> </u>			
51 52	Clay									
52 57	Sand-Good	Net to 1								
57 58	Clay	• • • • • • • • • • • • • • • • • • • •	1:							
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ☑ constructed, ☐ reconstructed, or ☐ plugged										
under my jurisdiction and was completed on (mo/day/year) 01/22/2014 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 238 This Water Well Record was completed on (mo/day/year) 01/27/2014										
under the business	mess name of Premier Pun	o499 This V	vater Well F	tecord wa	as completed	on (mo/day/year)	1 1 10 14			
INSTRUCTION	S: Use typewriter or ball point pen	PLEASE PRESS EIDAM V	and PRINT of	Dy (Si	ignature)	and check the correct of	meswers. Send one convito			
Kansas	Department of Health and Environs	nent, Bureau of Water, Geol	logy Section, 1	000 SW Ja	ackson St., Suite	420, Topeka, Kansas	66612-1367.			
Telephone 785-	296-5524. Send one copy to WATE	R WELL OWNER and reta	in one for your	records. I	include fee of \$5	.00 for each construct	ed well. Visit us at			