

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

(to rectify lacking or incorrect information)

County: Reno

Location listed as:

Section-Township-Range: 19-255-5 W

Fraction ($\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$): NW NW SE

Location changed to:

19-255-9 W

NW NW NE SE

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: Written description, water right information in WIMAS database, and mapping tool & aerial photos on KGS website. initials: DRB date: 5/24/2011

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.

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: RENO		NW 1/4 NW 1/4 SE 1/4	19	T 25 S	R 5 E
Distance and direction from nearest town or city street address of well if located within city?					
1 West Langdon 1/2 North 1/4 West					
2 WATER WELL OWNER: Steve Dillon					
RR#, St. Address, Box # : 2396 West 82nd			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : Hutchinson, KS 67502			Application Number:		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: 85 ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.			
		WELL'S STATIC WATER LEVEL .27. ft. below land surface measured on mo/day/yr 8-25-91			
		Pump test data: Well water was ft. after hours pumping gpm			
		Est. Yield gpm: Well water was ft. after hours pumping gpm			
		Bore Hole Diameter in. to ft., and in. to ft.			
		WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well			
		1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)			
		2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well			
		Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/day/yr sample was submitted			
		Water Well Disinfected? Yes X No			
5 TYPE OF BLANK CASING USED:					
1 Steel 3 RMP (SR)		5 Wrought iron 8 Concrete tile		CASING JOINTS: Glued Clamped	
2 PVC 4 ABS		6 Asbestos-Cement 9 Other (specify below)		Welded	
		7 Fiberglass		Threaded	
Blank casing diameter 16 in. to ft., Dia in. to ft., Dia in. to ft.					
Casing height above land surface 3 in., weight lbs./ft. Wall thickness or gauge No.					
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					
		10 Other (specify) N/A			
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft., From ft. to ft.					
GRAVEL PACK INTERVALS: 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 27 ft. to 0 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 NONE			
Direction from well? How many feet?					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
		PLUG WELL			
85	27	CHLOR GRAVEL			
27	0	CEMENT			
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 (mo/day/year) 8-25-91 and this record is true to the best of my knowledge and belief. Kansas					
Water Well Contractor's License No. 537 This Water Well Record was completed on (mo/day/yr) 9-12-91					
under the business name of Flowers Drilling & Pump Service by (signature) Mike Flowers					
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, Topeka, Kansas 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					