1 LOCATION OF WATER V	WELL:	Fraction	Section Number	Township	Number	Range	Number
County: Washingt	on 3	W45W45E4	4	3) _{E/W}
Distance and direction from pearest town or city street address of well if located within city?							
1/2 mile east, 6 1/2 miles south, 1/2 mile west of Hanover, K5							
water well owner: John Hynck							
RR #, St. Address, Box #: 300 N. Belgrave City, State, ZIP Code : Han Over, VS 101945 Board of Agriculture, Division of Water Resources Application Number:							
3 MARK WELL'S LOCATION		4 DEPTH OF WELL	110				
AN "X" IN SECTION BOX:		WELL'S STATIC WATER	R LEVEL ft.				
		WELL WAS USED AS:					
NW N	E	Domestic 2 Irrigation	5 Public Water Supply6 Oil Field Water Supp		9 Dewateri 10 Monitorir		
w	Е	3 Feedlot	7 Domestic (Lawn & G	arden)	1 Injection	Well	
VV		4 Industrial	8 Air Conditioning	1	12 Other		
SW SE SE Was a chemical / bacteriological sample submitted to Department? Yes							
Water Well Disinfected: Yes No MA							
Š		vvaler vven Distriected. Te	S				
5 TYPE OF BLANK CASING USED:							
Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile							
Blank casing diameter in. Was casing pulled? Yes No If yes, how much in.							
CPOLIT DI LIC MATERIAL: 1 Nest coment 2 Coment grout 2 Pontonite 4 Other							
Grout Plug Intervals:	From	` . · ·		oft.,			ft.
What is the nearest sour	ce of possible c	ontamination:					
 Septic tank Sewer lines 		6 Seepage pit 7 Pit privy	11 Fuel storage12 Fertilizer storage	16	Other (spe		
3 Watertight sewer lines		8 Sewage lagoon	13 Insecticide storage	13 Insecticide storage			
4 Lateral lines 5 Cess pool		9 Feedyard 10 Livestock pens	14 Abandoned water v15 Oil well/Gas well	well			
Direction from well?		How many	feet?				
FROM TO PLUGGING MATERIALS							
D 4 34	Tonso	si 1					
3/1 /0/4	Bento	nik Olya					
10CL 1/0CL	DULANI	GI					
UT11 414.	JUDSOIT	7/11					
7							
CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)							
→ (mo/day/year) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo/day/year)							
by (signature) .A John Jynes							
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., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.							
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WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO._____