		WATER WELL PLUGGING R	ECORD Form WWC-5P	KSA 82a-1212 ID N	10	
1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number	
Cou	unty: Washington	SW4JW4JE14	4	3	5 E/W	
Distance and direction from percest 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 HYNEK  300 N. BEIGNAVE  Board of Agriculture Division of Water Becourses						
	City, State, ZIP Code : Handver, 45 (200945)  Application Number:					
3	MARK WELL'S LOCATION WITH	4 DEPTH OF WELL	42 ft.			
	AN "X" IN SECTION BOX:	WELL'S STATIC WATE	R LEVEL			
	N	WELL WAS USED AS:				
	NW NE	Domestic	5 Public Water Supply			
		2 Irrigation 3 Feedlot	<ul><li>6 Oil Field Water Supp</li><li>7 Domestic (Lawn &amp; G</li></ul>			
W	E	4 Industrial	8 Air Conditioning	12 Other		
	SW SE Was a chemical / bacteriological sample submitted to Department? Yes					
		Water Well Disinfected: Yes No				
	S	Water Well Distributed.				
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						
Casing height above or below land surface in.						
GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other						
What is the nearest source of possible contamination:						
, , ,				16 Other (sp	ecify below)	
<ul><li>2 Sewer lines</li><li>3 Watertight sewer lines</li></ul>		<ul><li>7 Pit privy</li><li>8 Sewage lagoon</li></ul>	<ul><li>12 Fertilizer storage</li><li>13 Insecticide storage</li></ul>			
	<ul><li>4 Lateral lines</li><li>5 Cess pool</li></ul>	<ul><li>9 Feedyard</li><li>10 Livestock pens</li></ul>	<ul><li>14 Abandoned water</li><li>15 Oil well/Gas well</li></ul>	well		
Direction from well? How many feet?						
FROM TO PLUGGING MATERIALS						
1	2 .	oil				
2	off left Bento	onite Plug				
1	of War	il Fill				
U	TH. THE JUDGE	71 <del>7</del> 11 P				
-						
7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on						
(mo/day/year)						
by (signature) X under the business name of						
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						
10	St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.					