					WATER WELL PLUGGING REC	ORD Form WWC-5P	KSA 82a-1212 ID N	Ю		
1	LOCATI	ON OF W	ATER WELL:		Fraction	Section Number	Township Number	Range	Number	
Cou	County: Reno			1	VE 14 NW14 NW14	29	22	5	5 E/W	
					ity street address of well if locate		0.01			
43 + LORRaine, Hutchinson, Ks 67501										
2										
	RR #. St.	Address,	Box #: 125	E	. Ave B	Board of Agriculture	e, Division of Water Resource	ces		
City, State, ZIP Code: Hutchinson, Ks 67511 Application Number: 20										
3	MARK \		OCATION WITH		depth of well					
Г	N									
	~				WELL WAS USED AS:					
	NW		NE	1	1 Domestic 2 Irrigation	5 Public Water Supply6 Oil Field Water Supply				
				_	3 Feedlot	7 Domestic (Lawn & G				
W				E	4 Industrial	8 Air Conditioning	12 Other			
	sw		SE		Was a chemical / bacteriologic If yes, mo/day/yr sample was s	al sample submitted to Desubmitted	epartment? Yes	No .X		
					Water Well Disinfected: Yes.	<u>Х</u> No				
		S								
5										
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile										
			neter 5 i ove or below lan		Was casing pulled?	YesX No	If yes, how mu	ch 30'		
6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Hole Plug									
Grout Plug Intervals: From										
What is the nearest source of possible contamination:										
1 Septic tank2 Sewer lines					6 Seepage pit	11 Fuel storage	16 Other (spe			
			sewer lines		7 Pit privy8 Sewage lagoon	12 Fertilizer storage13 Insecticide storage	none			
4 Lateral lines5 Cess pool					9 Feedyard10 Livestock pens	14 Abandoned water v15 Oil well/Gas well	well			
Direction from well?										
	,									
FROM TO			111	Λ.	JGGING MATERIALS	_				
			Hole	1	49					
	12	30	Skno	<u>l</u>						
						_				
7										
CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)										
	Water W	ell Contrag	tor's License No			Ahis Wa	ter Wal Record was comp	oleted on (mo	o/day/year)	
by (signature) Julia Dalala										
INIC						and print algarly. DI	oo fill in blanksdadin	o or sirels 4	no porrect	
ans	swers. Ser	nd top the	ee copies to K	uali ans	point pen. <u>Please press firmly</u> as Department of Health and	r and <u>print</u> clearly. Plea: Environment, Bureau d	se fiii in blanks, underlin of Water, Geology Sectio	e or circle th n, 1000 SW	le correct / Jackson	
St.	Ste. 420,	Topeka,	Kansas 66612	2-13	67. Telephone: 785/296-5522	. Send one to Water W	ell Owner and retain one	e for your re	ecords.	