IDNO MW-4

$\lceil 1 \rceil$	LOCATION OF WATER WELL:			Fraction	Section Number	Township Number	Range Number	
	County: Reno			9W 1/4 SW 1/4 SE 1/4	11	238	060	
Distance and direction from nearest town or city street address of well if located within city?								
8-28 W. 4th st., Hatchinson								
2 WATER WELL OWNER: Mr. Denn's Drek								
	RR#, St. Address, Box #: 1215 E. 4th Avenue City, State, ZIP Code: Hertchfuson, KS 67501				Application Number:			
3	AN SYT IN CECTION DOV.							
Γ	Al4 X	N SECTION	I BOX:	WELL'S STATIC WATE	R LEVEL 9.34 ft.			
				WELL WAS USED AS:				
	N	w —	— N E ——	1 Domestic	5 Public Water Supp		ering	
				2 Irrigation 3 Feedlot	6 Oil Field Water Su 7 Domestic (Lawn &			
W			E	4 Industrial	8 Air Conditioning			
S W S E Was a chemical / bacteriological sample submitted to Department?Yes							No	
	If yes, mo/day/yr sample was submitted							
Water Well Disinfected: Yes No								
5	5 TYPE OF BLANK CASING USED:							
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below)								
	PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile							
Blank casing diameterin. Was casing pulled? Yes No							uch	
6								
Γ	Grout Plug Intervals: From							
			st source of poss	sible contamination:	© Food atoms	40. Other (co	antha balana	
		Septic tank Sewer lines		6 Seepage pit7 Pit privy	Fuel storage 12 Fertilizer storage	16 Other (sp e	ecity below)	
		Vatertight sewer lines ateral lines		8 Sewage lagoon 9 Feedyard	13 Insecticide store 14 Abandoned water	-		
	5 Cess Pool		10 Livestock pens	15 Oil well/Gas wel				
Direction from well?								
FROM TO			PLU	GGING MATERIALS				
0		2	Mattie ma	tental + Pavement				
2		15		tente hydrated				
						F	RECEIVED	
-		-				A.I	OV 1 7 0004	
						IN	OV 1 7 2004	
						BUR	EAU OF WATER	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was comple on (mo/day/year)								
by (signature)								
INSTRUCTIONS: Use typewriter or ball point pen. <u>Please press firmly</u> and <u>print</u> 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 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.								