

LOCATION OF WATER WELL: Reno	Fraction SW 1/4 NE 1/4 SW 1/4	Section Number 09	Township Number 23 SOUTH	Range Number 05 WEST																								
Distance and direction from nearest town or city street address of well if located within city? APPROXIMATELY 1613' North and 1780' East of the intersection of 4th Avenue and Halstead Street, Hutchinson, KS																												
WATER WELL OWNER: City of Hutchinson																												
RR#, St. Address, Box #: City, State, ZIP Code:		Board of Agriculture, Division of Water Resources Application Number: N/A																										
MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX N <table border="1" style="margin: 10px auto; width: 150px; height: 100px; text-align: center;"><tr><td></td><td></td></tr><tr><td>X</td><td></td></tr><tr><td></td><td></td></tr></table> S				X				DEPTH OF WELL 15.5 ft. WELL'S STATIC WATER LEVEL N/A – Water level below total well depth WELL WAS USED AS: <table style="width:100%;"><tr><td>1 Domestic</td><td>5 Public Water Supply</td><td>9 Dewatering</td></tr><tr><td>2 Irrigation</td><td>6 Oil Field Water Supply</td><td>10 Monitoring Well SVE-MD2</td></tr><tr><td>3 Feedlot</td><td>7 Lawn and Garden Only</td><td>11 Injection Well</td></tr><tr><td>4 Industrial</td><td>8 Air Conditioning</td><td>12 Other</td></tr></table> Was a chemical/bacteriological sample submitted to Department? Yes ☐ No ☒ If yes, mo/day/yr sample was submitted : / / WaterWell Disinfected: Yes ☒ No ☐			1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well SVE-MD2	3 Feedlot	7 Lawn and Garden Only	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other						
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TYPE OF BLANK CASING USED: <table style="width:100%;"><tr><td>1 Steel</td><td>3 RMP (SR)</td><td>5 Wrought</td><td>7 Fiberglass</td><td>9 Other ____</td></tr><tr><td>2 PVC</td><td>4 ABS</td><td>6 Asbestos-Cement</td><td>8 Concrete Tile</td><td></td></tr></table> Blank casing diameter 0.75 in. Was casing pulled? Yes ☒ No ☐ if yes, how much ALL Casing height above or below land surface N/A feet.					1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other ____	2 PVC	4 ABS	6 Asbestos-Cement	8 Concrete Tile															
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GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Grout Plug Intervals: From 15.5 ft. to 3.0 ft. What is the nearest source of possible contamination: <table style="width:100%;"><tr><td>1 Septic tank</td><td>6 Seepage pit</td><td>11 Fuel Storage</td><td rowspan="5">16 Other – Grain Elevator, carbon tetrachloride groundwater remediation project</td></tr><tr><td>2 Sewer lines</td><td>7 Pit privy</td><td>12 Fertilizer storage</td></tr><tr><td>3 Watertight sewer lines</td><td>8 Sewage lagoon</td><td>13 Insecticide storage</td></tr><tr><td>4 Lateral lines</td><td>9 Feedyard</td><td>14 Abandoned water well</td></tr><tr><td>5 Cess Pool</td><td>10 Livestock pens</td><td>15 Oil well / Gas well</td></tr></table>					1 Septic tank	6 Seepage pit	11 Fuel Storage	16 Other – Grain Elevator, carbon tetrachloride groundwater remediation project	2 Sewer lines	7 Pit privy	12 Fertilizer storage	3 Watertight sewer lines	8 Sewage lagoon	13 Insecticide storage	4 Lateral lines	9 Feedyard	14 Abandoned water well	5 Cess Pool	10 Livestock pens	15 Oil well / Gas well								
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CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 03 / 14 / 2007 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. N/A This Water Well Record was completed on (mo/day/year) 04 / 10 / 2007 under the business name of City of Hutchinson by (signature) <i>[Signature]</i> , Licensed Geologist																												
INSTRUCTIONS: Use typewriter or ball point pen. Please press firmly and print clearly. Please fill in blanks, and 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: 913/296-3565. Send one to Water Well Owner and retain one for your records.																												