MW-11 ID NO.00190835 KSA 82a-1212 WATER WELL PLUGGING RECORD Form WWC-5P LOCATION OF WATER WELL: Number Fraction Section Number Township Number Range County: Reno NE" NE " NE " EW Distance and direction from nearest town or city street address of well if located within city? E. 4th Street Hutchinson 6750 WATER WELL OWNER: Dick's Enterprises RR #, St. Address, Box #: 1715 E. 4+h Street Board of Agriculture, Division of Water Resources City, State, ZIP Code Application Number: Hutchinson DEPTH OF WELL MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: WELL'S STATIC WATER LEVEL 1.3.... ft. WELL WAS USED AS: 1 Domestic 5 Public Water Supply 9 Dewatering 6 Oil Field Water Supply Monitoring Well 2 Irrigation 3 Feedlot 7 Domestic (Lawn & Garden) 11 Injection Well Ε 12 Other 4 Industrial 8 Air Conditioning If yes, mo/day/yr sample was submitted Water Well Disinfected: Yes No TYPE OF BLANK CASING USED: 9 Other (Specify below) 1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass (2) VC 4 ABS 6 Asbestos-Cement 8 Concrete Tile Yes ...X.... Blank casing diameterZ..... in. If yes, how much ... Was casing pulled? Casing height above or below land surface in. GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other..... From 25 ... ft. Grout Plug Intervals: to ft., From What is the nearest source of possible contamination: 1 Septic tank 11 Fuel storage Other (specify below) 6 Seepage pit LUST Site 12 Fertilizer storage 2 Sewer lines 7 Pit privy 13 Insecticide storage 3 Watertight sewer lines 8 Sewage lagoon 4 Lateral lines 9 Feedyard 14 Abandoned water well 15 Oil well/Gas well 5 Cess pool 10 Livestock pens 150

Directi	on from well?	NE How many feet?
FROM	то	PLUGGING MATERIALS
75'	3'	Bentonite Chias
3	ව ්	Bentonite Chips Native Material

CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 4-5-0.7 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) 2-2-1 and this record is true to the best of my knowledge and belief. Kansas Water Well Record was completed on (mo/day/year) by (signature) 2-2-1 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) 2-2-1 and this record is true to the best of my knowledge and belief. Kansas Water Well Record was completed on (mo/day/year)

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, 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.