

LOCATION OF WATER WELL: RENO	Fraction SW ¼ SW ¼ NW ¼	Section Number 07	Township Number 23 SOUTH	Range Number 05 WEST
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Distance and direction from nearest town or city street address of well if located within city?
APPROXIMATELY 310 FT. EAST AND 460 FT. NORTH OF THE INTERSECTION OF N. PLUM STREET & E. 11TH AVE., HUTCHINSON, KS

WATER WELL OWNER: HUTCHINSON COMMUNITY COLLEGE well no. 4
 RR#, St. Address, Box #: 1300 N. PLUM
 City, State, ZIP Code: HUTCHINSON, KS 67501
 Board of Agriculture, Division of Water Resources
 Application Number:

MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX

N	
X	
S	

DEPTH OF WELL 24.0 ft.

WELL'S STATIC WATER LEVEL 14.0 ft.

WELL WAS USED AS:

1 Domestic	5 Public Water Supply	9 Dewatering
2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well
3 Feedlot	7 Lawn and Garden Only	11 Injection Well
4 Industrial	8 Air Conditioning	12 Other

Was a chemical/bacteriological sample submitted to Department? Yes ☐ No ☒

If yes, mo/day/yr sample was submitted: / /

Water Well Disinfected: Yes ☒ No ☐

TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other
2 PVC	4 ABS	6 Asbestos-Cement	8 Concrete Tile	

Blank casing diameter 10.0 in. Was casing pulled? Yes ☐ No ☒ if yes, how much 0.0 ft bls
 Casing height ~~above~~ or below land surface 3.0 feet.

GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout **3 Bentonite** 4 Other

Grout Plug Intervals: From 14.0 ft. to 3.0 ft.

What is the nearest source of possible contamination:

1 Septic tank	6 Seepage pit	11 Fuel Storage	16 Other
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	

Direction from well? Northeast How many feet? 70

FROM	TO	PLUGGING MATERIALS
24.0	14.0	CLEAN, COURSE SAND
14.0	3.0	BENTONITE HOLE-PLUG
3.0	0	TOPSOIL

NOTE: PLUGGING WITNESSED BY
DAVID RANDOLPH,
EQUUS BEDS GMD2 ON 7/17/08

CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 07 / 17 / 2008 and this record is true to the best of my knowledge and belief.
 Kansas Water Well Contractor's License No. NA under the business name of N/A
 by (signature) DON ROSE, ASSISTANT DIRECTOR OF PLANT FACILITIES

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.