IW-3

WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID NO.00371894

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Reno	NW4 NE 4 NE 4 NE	18	23	5 ∞
Distance and direction from nearest tow	wn or city street address of well if ic	ocated within city?		
1215 E. Four +1	h Hutchinso	n KS 6750	01	
2 WATER WELL OWNER: Dick	k's Enterprises	•		
RR #, St. Address, Box #: 121	5 E, Fourth	Board of Agriculture, I	Division of Water Resource	es
	chinson KS 6750	Application Number: 25 ft.		
MARK WELL'S LOCATION WIT AN "X" IN SECTION BOX:	1 1	ER LEVEL 14 h.		
N X	WELL WAS USED AS	S:		
NW NE -	1 Domestic	5 Public Water Supply	9 Dewaterin	
	2 Irrigation 3 Feedlot	6 Oil Field Water Supply 7 Domestic (Lawn & Gar		
W	E 4 Industrial	8 Air Conditioning		_
SW SE	Was a chemical / bacterio	logical sample submitted to Department	artment? Yes	۱۰X
	if yes, mo/day/yr sample v	vas submitted	••••	
S	Water Well Disinfected: `	Yes NoX		
5 TYPE OF BLANK CASING USE	D: .			
	5 Wrought 7 Fiberg	glass 9 Other (Specify beld	ow)	
	6 Asbestos-Cement 8 Concr			21
Blank casing diameter Casing height above or below a	. in. Was casing pulled? and surface3	Yes .X No	If yes, how muc	ch3'
6 GROUT PLUG MATERIAL:	1 Neat cement 2 Cement gr		ner	
•	om 25 ft. to 3 f	t., Fromft. to .	ft., From	to ft.
What is the nearest source of po 1 Septic tank	6 Seepage pit	11) Fuel storage	16 Other (spec	cify below)
2 Sewer lines 7 Pit privy		12 Fertilizer storage		
3 Watertight sewer lines 8 Sewage lagoon 4 Lateral lines 9 Feedyard		13 Insecticide storage14 Abandoned water we		
5 Cess pool	10 Livestock pens	15 Oil well/Gas well		·
Direction from well?				
FROM TO	PLUGGING MATERIALS			
2-1 -1 -	-1.			
	onite chips			
3 D Nativ	e material			
		·		
7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 7 - 21 - 09 and this record is true to the best of my knowledge and belief. Kansas				
Water Well Contractor's License No	C	and this record is true t	o tne best of my knowle r Well Record was comp	leted on (mo/day/year)
by (signature) Quantum	o. er the business name of Gree Agam	en Field Contract	tors	
INSTRUCTIONS: Use typewriter or answers. Send top three copies to I	r ball point pen. <u>Please press fi</u> Kansas Department of Health a	<u>rmly</u> and <u>print</u> clearly. Please and Environment, Bureau of	i fill in blanks, underline Water, Geology Section	or circle the correct n, 1000 SW Jackson

Ct. 400 Taraka Kanaga eget 2-1367 Telephone: 785/296-5522 Send one to Water Well Owner and retain one for your records.