IDNO. MW-5

1	LOCATION OF WATER WELL:				Fraction	Section Number	Township Number	Range Number	
Ш	County: Reno				5W45W 45E 14	11	Z3 S	06 W	
⊢			m nearest tow			•			
Distance and direction from nearest town or city street address of well if located within city?  828 W. 4th St., Hutchi usen									
2 WATER WELLOWNER: Mr. Dennis Dick									
	RR #, St	. Address, Box	#: 1215 E	7.	Board of Agriculture, Division of Water Resources Application Number:			S	
3		WELL'S LOCA	ATION WITH		4 DEPTH OF WELL	ft			
ľ	AN "X	' IN SECTION	BOX:		WELL'S STATIC WATER LEVEL				
					WELL WAS USED AS:				
	N	'w —	N E		1 Domestic	5 Public Water Supp	ly <u>9</u> Dewate	erina	
					2 Irrigation	6 Oil Field Water Su	oply Monito	ring Well	
w	-			E	3 Feedlot 4 Industrial	7 Domestic (Lawn & 8 Air Conditioning			
		w			Was a chemical / bacteri	iological sample submitte	d to Department?Yes	No X	
Was a chemical / bacteriological sample submitted to Department? Yes									
		<u>                                    </u>			Water Well Disinfected:	Yes No			
5									
	1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below)  PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile								
Blank casing diameter									
6	GROU"	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other							
Н	Grout Plug Intervals: From								
What is the nearest source of possible contamination:									
		eptic tank ewer lines			6 Seepage pit 7 Pit privy	Fuel storage 12 Fertilizer storage	16 Other (spe	ecify below)	
	3 W	atertight sev	ver lines		8 Sewage lagoon	13 Insecticide stora	ge		
	4 Lateral lines 5 Cess Pool				9 Feedyard 10 Livestock pens	<ul><li>14 Abandoned wate</li><li>15 Oil well/Gas well</li></ul>			
Direction from well? Nest + North How many feet?									
F	ROM	то	Р	LUG	GGING MATERIALS				
0		2	Mattre	No	aternal + Pavement				
2		15	Chepl	93C	ntenite-hydrated				
							RECEI\	√ED	
							NOV 1 7	2004	
							BUREAU OF	WATER	
L.									
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)									
Water Well Contractor's Cicense No. 650. This Water Well Record was completed on (mo/day/year)  110 164 Sovetces									
by (signature)									
IN			typewriter or	bal	Il point pen. <u>Please press fi</u>	rmly and print clearly. Plea	ase fill in blanks underlin	e or circle the correct	
an	swers.	Send top the	ree copies to	Ka	insas Department of Heali ater Well Owner and retain on	th and Environment, Bur	eau of Water, Topeka, h	Kansas 66620-0001.	