

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
	County: Reno	NE 1/4 SW 1/4 SW 1/4	22	23 S	6 E/W

Distance and direction from nearest town or city street address of well if located within city?

1910 S. Broadacres Road, Hutchinson

2	WATER WELL OWNER: Koch Underground Storage	
	RR #, St. Address, Box #: 1910 S. Broadacres Road	Board of Agriculture, Division of Water Resources
	City, State, ZIP Code: Hutchinson, KS 67501	Application Number: _____

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL 107.1 ft.										
		WELL'S STATIC WATER LEVEL 28 ft.											
		WELL WAS USED AS:											
		<table border="0"> <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</td> </tr> <tr> <td>3 Feedlot</td> <td>7 Domestic (Lawn & Garden)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other _____</td> </tr> </table>		1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well	3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well	4 Industrial
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4 Industrial	8 Air Conditioning	12 Other _____											
Was a chemical / bacteriological sample submitted to Department? Yes _____ No X _____													
If yes, mo/day/yr sample was submitted _____													
Water Well Disinfected: Yes _____ No X _____													

5	TYPE OF BLANK CASING USED:	
	<input checked="" type="radio"/> 1 Steel <input type="radio"/> 2 PVC <input type="radio"/> 3 RMP (SR) <input type="radio"/> 4 ABS <input type="radio"/> 5 Wrought <input type="radio"/> 6 Asbestos-Cement <input type="radio"/> 7 Fiberglass <input type="radio"/> 8 Concrete Tile <input type="radio"/> 9 Other (Specify below) _____	Blank casing diameter 4 in. Casing height above or below land surface N/A in.
Was casing pulled? Yes <input checked="" type="checkbox"/> No _____		If yes, how much 3'

6	GROUT PLUG MATERIAL:																					
	<input type="radio"/> 1 Neat cement <input type="radio"/> 2 Cement grout <input checked="" type="radio"/> 3 Bentonite <input checked="" type="radio"/> 4 Other Native Soil	Grout Plug Intervals: From 0 ft. to 3 ft., From 3 ft. to 107.1 ft., From _____ to _____ ft.																				
What is the nearest source of possible contamination:																						
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Direction from well? _____		How many feet? _____																				

FROM	TO	PLUGGING MATERIALS
0	3	Native soil (11")
3	25	Bentonite (11")
25	107.1	Bentonite (4")

Hu-04

7	CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 6/16/2005 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 527 This Water Well Record was completed on (mo/day/year) 6/29/2005 under the business name of GeoCore, Inc.	
	by (signature) <i>Don Relf</i>	

INSTRUCTIONS: Use typewriter or ball point pen. Please press firmly and print 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.