Form WWC-5P

KSA 82a-1212 ID NO.00324096

	ATION OF					T =			NI.	
1 400	ATION OF WAT	ER WELL:	Fraction	Section	Number	Township	Number	Range	Number	
County: Reno SEX NEX NWX						23		6	EW	
Distance and direction from nearest town or city street address of well if located within city?										
2617 N. Main Hutchinson KS 67502										
2 WAT	ER WELL OWN	IER: TOE E								
RR #, St. Address, Box #: P.O. Box 1303  City, State, ZIP Code : Hutchinson KS 67504  Board of Agriculture, Division of Water Resources  Application Number:										
3 MARK WELL'S LOCATION WITH 4 DEPTH OF WELL										
AN "X" IN SECTION BOX: WELL'S STATIC WATER LEVEL DCY ft.										
	N N	•								
	w ×		WELL WAS USED AS:		Mata- Com-li		O. Danistani			
		- NE	<ul><li>1 Domestic</li><li>2 Irrigation</li></ul>	6 Oil Fie	Public Water Supply  Oil Field Water Supply  9 Dewatering Monitoring Well					
w		E	3 Feedlot 4 Industrial		stic (Lawn & G nditioning		<ol> <li>Injection</li> <li>Other</li> </ol>			
					•			<b>V</b>		
SE SE Was a chemical / bacteriological sample submitted to Department? Yes										
Water Well Disinfected: Yes NoX										
5 TYPE OF BLANK CASING USED:										
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile										
Blank casing diameter										
6 GROU	JT PLUG MATE	RIAL: 1 Ne	at cement 2 Cement gro	ut 3 Bent	tohite 4	Other				
	Plug Intervals:	From2	4ft. to3ft.	, From	ft. t	o ft.,	From	t	o fr	
What is the nearest source of possible contamination:										
1 Septic tank			6 Seepage pit		12 Fertilizer storage 12 Insecticide storage		16 Other (spe		•	
Sewer lines     Watertight sewer lines			<ul><li>7 Pit privy</li><li>8 Sewage lagoon</li></ul>	13 inse						
4 Lateral lines 5 Cess pool			9 Feedyard 10 Livestock pens		ndoned water rell/Gas well	well				
	•	NW	•							
Direc .	tion from well?.		How many	feet?5.3						
FROM	то	· PLU	GGING MATERIALS							
24'	3'	0	. 21:							
	3	Dentoni	te Chips							
. 3'	0	Native	Material							
7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year).4-17-07. and this record is true to the best of my knowledge and belief. Kansas										
Water Well Contractor's License No.  ———————————————————————————————————										
by (sie	nature) Osa	under the	business name of G.c.e.e	n Field	Contra	ctors				
	by (signature) Personant P									
INSTRUCT	IDNS: Use tvi	newriter or hall r	onint nen. Please press fir	miv and print	clearly Plas	ase fill in hlank	cs underlin	e 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.