Form WWC-5P

KSA 82a-1212

ID NO.00087618

1	LOCA	TION OF WA	TER WELL:	Т	Fraction	Section	Number	Township	Number	Range Nu	umber
County: Revo					W%NW %NE%	,		23		6	E₩
-			n nearest towr		street address of well if loc	ated within city?					
2	25 E. 30+h St. Hutchinson KS 67501										
2 WATER WELL OWNER DAY SETTING											
RR #, St. Address, Box #: 25 E. 30+ h St. Board of Agriculture, Division of Water Resources											
_	City, St	ate, ZIP Code	: Hutel	<u> </u>	30n KS 61501	Applica	tion Number				
3		WELL'S LO	CATION WITH		4 DEPTH OF WELL 24 ft. WELL'S STATIC WATER LEVEL 14 ft.						
		N		1	WELL'S STATIC WATE	R LEVEL	ft.				
		×			WELL WAS USED AS:						
	N	v	NE		1 Domestic		ater Supply		9 Dewateri		
					2 Irrigation 3 Feedlot		Water Suppi c (Lawn & G		Monitorin Injection		
W				E	4 Industrial	8 Air Cond					•••••
	SW SE Was a chemical / bacteriological sample submitted to Department? Yes										
		s			Water Well Disinfected: Y	es No	X				
-	7/25										
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 diameter2 in. Was casing pulled? YesX No											
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other											
Grout Plug Intervals: From											
		s tne nearest eptic tank	source of poss	IDIE CO		14 Euclet		10	Other (spe	aife, balaus	
		ewer lines			7 Disputer			` '			
3Watertight 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?											
<u> </u>			1	DI 110							
<u> </u>	ROM	то		PLUG	GING MATERIALS						
24' 3' Bentonite chips											
	3'	0,	Native	e m	aterial						
_		-									
7	CONT	RACTOR'S	OF LANDOW	NER'	S CERTIFICATION: This	water well wa	s plugged	under my jur	sdiction a	nd was comple	led on
	Water V	y/year) Vell Contracto	r's License No.			and this h	This Wat	er Well Record	my knowle I was comp	uge and belief. F pleted on (mo/day	ansas y/year)
Water Well Contractor's License No											
					int pen. <u>Please press fir</u> Department of Health a						

St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.