ID NO. COO 87588

1 LOCATION	OF WATER WELL:	Fraction	Section Number	Township Number	Range Number	
County: Ren	.	NW4NW 4NE4	1	23	6 🕬	
Distance and direction from nearest town or city street address of well if located within city?						
25 E. 3	Wh St.	Hutchinson	KS 6750	L		
2 44755 445		OV Service				
RR #, St. Add City, State, Z	dress, Box #: 25 Circles : Hutching	130n KD 61501	Application Numbe	e, Division of Water Resour r:	ces	
	L'S LOCATION WITH ECTION BOX:	4 DEPTH OF WELL	24 ft.			
	×	WELL WAS USED AS:				
NW-	NE	1 Domestic	5 Public Water Supply			
		2 Irrigation 3 Feedlot	6 Oil Field Water Supp 7 Domestic (Lawn & G			
W	E	4 Industrial	8 Air Conditioning			
sw —	SW SE Was a chemical / bacteriological sample submitted to Department? Yes					
	S	Water Well Disinfected: Ye	es NoX			
5 TYPE OF B	LANK CASING USED:					
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below)						
②PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile						
Blank casin Casing heig	g diameter in. ght above or belowland su	Was casing pulled?		If yes, how mi	uch3.	
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other						
Grout Plug Intervals: From						
What is the nearest source of possible contamination: 1 Septic tank 6 Seepage pit 11 Fuel storage 16 Other (specify below)						
2 Sewer lines 7 Pit privy			12 Fertilizer storage			
(3) Waterti 4 Lateral	ight sewer lines	8 Sewage lagoon 9 Feedvard	13 Insecticide storage 14 Abandoned water			
5 Cess pool 10 Livestock pens 15 Oil well/Gas well						
Direction from well?						
<u> </u>						
		UGGING MATERIALS				
	3' Benton	ite chips				
3' 0		material				
CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)						
Water Well Contractor's License No						
by (signatur	re) Jan Pesara	Man.				
		point pen. Please press fir				
		as 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.