

KSA 82a-1212

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

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 4 DEPTH OF COMPLETED WELL 60 ft. ELEVATION:

Direction from well?	
	How many feet?

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 6/7/05 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 617 This Water Well Record was completed on (mo/day/yr) 8/11/05 under the business name of Douglas Pump Service, Inc by (signature) [Signature]

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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.