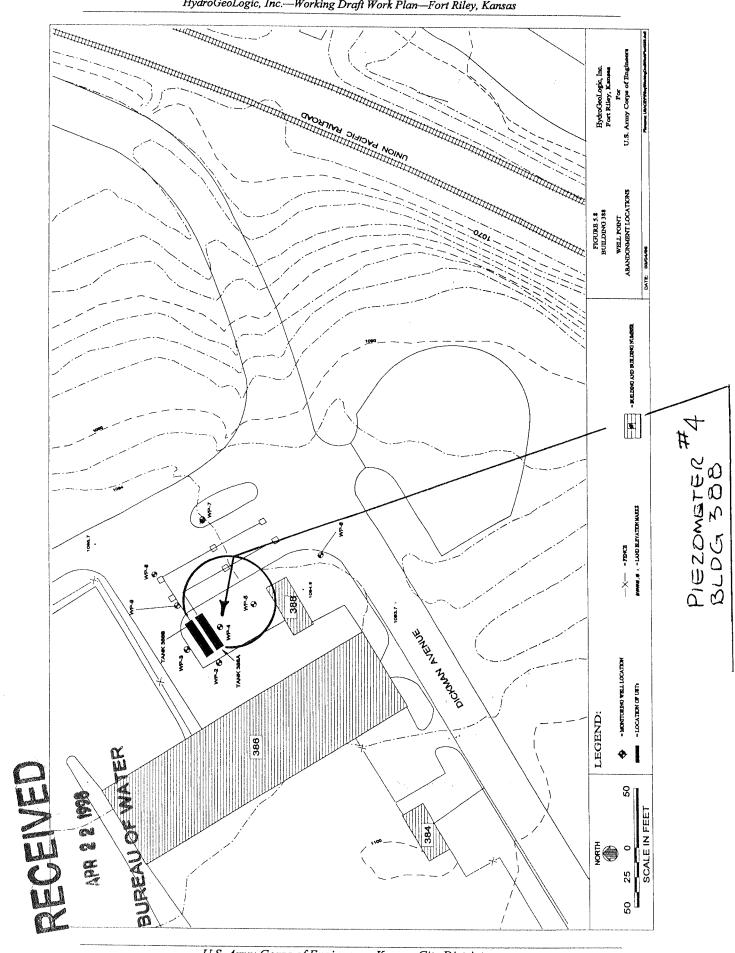
1 LOCATION OF WATER WELL:	Fraction	Section Number	Township	Number	Rang	je Number
County: County	SW1/4 NB/4 1/4	31	11	S	6	E
Distance and direction from  FORT BLOWNER:  2 WATER WELL OWNER:	Nearest town or city street SLDGUS ARMY COR	et address of well if	ルヤー WEER culture, Div	<u>4</u> S		Resources
	CC, MO 6416	Application N				
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: N	1 1	TER LEVEL Z. G. Z.				
PLEPOCE SEE	E 4 Industrial	5 Public Water Sup 6 Oil Field Water 7 Lawn and Garden 8 Air Conditioning	Supply 10 Only 11 12	Dewaterin Monitorin Injection Other	ng Well Well	
S W S E	If yes, mo/day/yr s	teriological sample s sample was submitted. cted: Yes No			nt? Yes.	No X
5 TYPE OF BLANK CASING USED	:	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			and the second s	Marie Carlo Car
2 PVC 4 ABS 6		rete Tile	(specify be		much	
Casing height above or be	low land surface.	Ain. Ma	MED			
	Fromft. tofr	t., Fromft. t	4 Other oft.		to	oft.
What is the nearest sourd  1 Septic tank 2 Sewer lines 3 Watertight sewer line 4 Lateral lines 5 Cess Pool	e of possible contamination 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens	on: 11 Fuel storage 12 Fertilizer stora 13 Insecticide stor 14 Abandoned water 15 Oil well/Gas wel	ge age well	Other (sp	pecify b	oelow)
Direction from well?		How many feet?				
FROM TO						
	et es exemp					
on (mo/day/year)	YS CERTIFICATION: This wat and this rec. icense No O.C	ord is true to the be	est of my kr	owledge ar	nd beli	ef. Kansa
INSTRUCTIONS: Use typewrite		ase press firmly and	<u>print</u> clear	ly. Pleas	se fill	in blanks

INSTRUCTIONS: Use typewriter or Ball point pen. <u>Please press firmly</u> and <u>print</u> 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: 913/296-3565. Send one to Water Well Owner and retain one for your records.



U.S. Army Corps of Engineers—Kansas City District