Distance and direction from nearest town or city street address of well if located within city? WATER WELL OWNER: V*B Interim, Inc.					WELL HECOHD	Form WWC			A1	r =		<u> </u>
Searce of direction from nearest town or city stress address of well if located within city? 700 N. Washinaton Abilene Ks NW-44	<u> </u>				CES		ection Number				• _	•
MATER WELL WATER TO BE A TITLED IN THE COMPLETED WELL A CAPTURE OF BLANK CASHG USED A SIGNATURE PROMOTER TO BE A TITLED IN THE COMPLETED WELL A CAPTURE OF THE COMPLETED WELL A CAPTURE OF THE CAPTURE OF	County:						, +7	7 1 7				E/3/S/
WITH WELL OWNER Was Statement Was Inter Im, Inc. Board of Agriculture, Division of Water Resource Zing, State, 2th Code Abi Lene Ks 674 10 Application Number: Abi Lene Ks Abi Lene	Distance						f		٨٨	111-	.UU	
Sine, 28, Address, Box # 1700 N. Washington Shark, 28, Address, Box # 1700 N. Washington Shark, 28, Address, Box # 1700 N. Washington AN XI IN SECTION BOX. WELL'S STATIC WATER LEVEL. WELL WATER TO BE USED AS 5 Public water supply 8 Air conditioning 11 Injection will 10 purpling gon will water use 1 1 Dimension of 10 Montain or 10 M						ne Ks			14/	VV	17	
Application Number Applica				•								
DOATH WELLS LOCATION WITH DEPTH OF COMPLETED WELL	RR#, St.	Address, Box #						Board of	of Agriculture, [Division (of Water R	lesource
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Pump test data: Well water was t. after hours pumping gord for the property of	₹	1 1			•	<i>y</i> , , , ,						
Est Yeld gome Well water was t. after hours pumping gome Hole Diameter V. in to 10 t	1	i i							= =			
Bore Hole Diameter		NM -	- NE Fet	•					•			
Weight above land surface Type OF SCREEN OR PERFORATION MATERIAL: Sleel 3 Stanless steel 5 Fiberglass 8 FIMP (SR) 1 Ownstructed, 2 Blass 4 Galvanized steel 6 Concrete tile 9 ABS 1 Concrete tile 0 Concre		!!!										
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Stark casing diameter			3 RMP (SR)	•	6 Asbestos-Cement	9 Othe	er (specify below	()	Welde	ed	/	
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INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct abovers. Send top three copies to Kansas Department	ľ					· · · · · · · · · · · · · · · · · · ·			ma	0	B.Me	ier