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5 10 Light gray clay with trace pebbles 10 15 Brown tight clay with gray mottling and iron stainings Flushmount waiver from BOW 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (+) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 6/15/10 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 757 This Water Well Record was completed on (mo/day/year) 8/6/10 under the business name of Larsen & Associates, Inc. by (signature) INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for				race nebbles							
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Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Seed one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell.	INSTRUCTI	ONS: Please	fill in blanks or circle th	e correct answ	ers. Send top	three copies	to Kansas Den	artiment o	Health and Env	ironmen	t, Bureau of Water,
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