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by (signature) Send to the business name of Konnett Activity by (signature) Send to the correct answers. Send top three copies to Kansas Department of Health and Environment, Office of Oil Field and Environmental Geology, Regulation and Permitting Section, Topeka, Kansas 66620-7500, Telephone: 913/862-9360. Send one	CONTRACTOR'S	Soud rock Thouly. TO 100ft	"IFICATION: This water wel			ENV	VISION VIRONM	OF ENT der my jurisdiction	
NSTRUCTIONS: 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, Office of Oil Field and Environmental Geology, Regulation and Permitting Section, Topeka, Kansas 66620-7500, Telephone: 913 862-9360. Send one	CONTRACTOR'S ompleted on (mo/day	Soud rock Thouly. TO 100ft	8. 6		and this reco	ENV	VISION VIRONM 3) plugged und	OF ENT der my jurisdiction owledge and beli	
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to WATER WELL OWNER and retain one for your records.	CONTRACTOR'S Completed on (mo/day ater Well Contractor der the business na INSTRUCTIONS: Use to	Sanol rock Thouly TO 10 ft OR LANDOWNER'S CERT (year) 5 25	8.6This Wate	r Well Record was	and this reco s completed by (signa blanks, underlin	onstructed, or (ord is true to the on (mo/day/yr) ture)	IRONM 3) plugged und best of my kn	der my jurisdiction owledge and belified by three copies to	ef. Kansa