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/yr)

02/14/05

Water Well Contractor's License No.

04/04/05

Under the business name of

Quad State Services, Inc.

04/04/05

der the business name of Quad State Services, Inc. by (signature)

INSTRUCTIONS:. Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.