| Instance and direction from necessal town or city street address of well at greated within city?  WATER WELL OWNER: OWNER: OWNER: STATE ST     |  | 1274**  | ED WELL DECORD                | Faur 1451/5          |                     | - 4040                                | J                   | 4W-4                       |
|--|--|---|-------------------------------|----------------------|---------------------|---------------------------------------|---------------------|----------------------------|
| Souther Additions and derection from neutral town or riply street address of well ignored within city?  WATER WELL OWNER: OMAH #35 84  Res. St. Address. Box 4   195   | 1 LOCATION OF WATER WELL:  |   | EH WELL HECORD                |                      |                     |                                       | Number              | Range Number               |
| Instance and direction from necessal town or city street address of well at greated within city?  WATER WELL OWNER: OWNER: OWNER: STATE ST     | County: Marin  | NE.   | 14 1/E 14 1/                  | 11. ]                | 4                   | · · · · · · · · · · · · · · · · · · · | _                   | l <u>~</u> ~               |
| WATER WELL OWNER OF A CREAT CASE OF A CONTRACTOR STATE LYCLE Water Support above and Agriculture, Division of Water Resource Application Number:  LOCATE WELLS LOCATION WITH A STATE LYCLE WATER AND A     |  | it town or city street                            | address of well if locate     |                      |                     | 10                                    |                     |                            |
| WATER WELL OWNER OF A CREAT CASE OF A CONTRACTOR STATE LYCLE Water Support above and Agriculture, Division of Water Resource Application Number:  LOCATE WELLS LOCATION WITH A STATE LYCLE WATER AND A     |  |   | 911                           | n. Wa                | Inut                | Hapa                                  | a. KS               |                            |
| Ref. St. Address, Box # 1/15   | 2 WATER WELL OWNER:  | West #2524  |                               |                      | .,,,,,,             | (                                     | <del>) , ,</del>    |                            |
| In State, 2P Code    CONTEMENTS     | RR#, St. Address, Box # : ///  | S Main Suit                                       | U500                          |                      |                     | Board o                               | f Agriculture, D    | Division of Water Resource |
| LICCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX  WELL'S STATIC WATER LEVEL WITH A 1" R below land surface measured on modely) WELL'S STATIC WATER LEVEL WITH YELL WATER LEVEL WELL'S STATIC WATER LEVEL WELL WELL WELL WELL WELL WELL WEL   | City, State, ZIP Code  | ichtta KS l                                       | 01202-3745                    |                      |                     |                                       | •                   |                            |
| Depth(s) Groundwater Encountered 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.  | LOCATE WELL'S LOCATION W   |   |                               | 30 .                 | . ft ELEVA          | ATION:                                | _                   |                            |
| WELLS STATIC WATER LEVEL Water was the after hours pumping gor per per per level states: Well water was the after hours pumping gor below in the state of the sta     | AN "X" IN SECTION BOX:   | Depth(s) Groun                                    | dwater Encountered -          | N34.                 | 25 ft               | 2                                     | ft. 3.              | ft.                        |
| Pump lest data: Well water was fi. after hours pumping gor will water was fi. after hours pumping gor water was fi. after hours pumping gor was state hours pumping gor water was fi. and in. to fi f  | I XI   |   |                               |                      |                     |                                       |                     |                            |
| Best Noted Services and Service     |  |   |                               | •                    |                     |                                       |                     | , , , , ,                  |
| Bore Hole Diameter & Mot in to & O in to & In      | NW  NE   |   | •                             |                      |                     |                                       | •                   |                            |
| WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 2 Ingrasion 4 Industrial 7 Lawn and garden only (i) Monitoring well 2 Ingrasion 4 Industrial 7 Lawn and garden only (ii) Monitoring well 2 Ingrasion 4 Industrial 7 Lawn and garden only (iii) Monitoring well 2 Ingrasion 4 Industrial 7 Lawn and garden only (iii) Monitoring well 2 Ingrasion 2 In     |  |   | ~~~                           |                      |                     |                                       | •                   |                            |
| 1 Domestic   3 Feedor   6 Dil field water supply   9 Dewatering   2 Diliger (Specify below)  | ž W I I  | 4 t!  |                               |                      |                     |                                       |                     |                            |
| was a chemical/bacteriological sample submitted to Department? Yes. No. X. If yes, mordary's sample was y with the continuous states of the continuous states of the continuous states of the continuous states. Prom. It to It. From. It It. From. It It. From. It. From. It. It. From. It. From. It. It. From. It. It. From. It. It.     | 7   1 1 1 1 1  | 1 Domesti   | c 3 Feedlot                   | 6 Oil field wa       | iter supply         | 9_Dewatering                          | -                   |                            |
| was a chemical/bacteriological sample submitted to Department? Yes. No. X. If yes, mordary's sample was y with the continuous states of the continuous states of the continuous states of the continuous states. Prom. It to It. From. It It. From. It It. From. It. From. It. It. From. It. From. It. It. From. It. It. From. It. It.     | SW   SE  | 2 Irrigation                                      | 4 Industrial                  | 7 Lawn and           | garden only         | 10 Monitoring v                       |                     |                            |
| TYPE OF BLANK CASING USED:  1 Steel 3 RMP (SR) 6 Asbestor-Cement 9 Other (specify below) Worked  | 1 1 i 1 i  | Was a chemica                                     | l/bacteriological sample      |                      |                     |                                       |                     |                            |
| 1 Steel 3 RMP (SR) 6 Abbestos-Cement 9 Other (specify below) Wickded Progress 1 Threaded X 1 Abbestos casing diameter 1 in to 1. ft., Dia      | <u> </u>   | •   | ,                             |                      | •                   |                                       | •                   |                            |
| Pivot   ABS   7 Fiberglass   8 FIMP (SR)   11 Fiberglass   7 Fiberglass   8 FIMP (SR)   11 Fiberglass   12 Fiberglass   13 Fiberglass   13 Fiberglass   14 Fiberglass   15 Fiberglas       | 5 TYPE OF BLANK CASING USE   | D:  | 5 Wrought iron                | 8 Concr              | ete tile            | CASING .                              | IOINTS: Glued       | I Clamped                  |
| Lank Casing diameter   | 1 Steel 3 RMI  | P (SR)  | 6 Asbestos-Cement             | 9 Other              | (specify belo       | w)                                    | Welde               | ed <u>.</u>                |
| asing height above land surface. HWY. in, weight WY. Ibs./ft. Wall thickness or gauge No. YPVE OF SCREEN OR PERFORATION MATERIAL: DPVC  1 Steel 3 Stanless steel 5 Fiberglass 8 RNP (SR) 11 Other (specify)  | (2)PVC 4 ABS   | ,   | _ 7 Fiberglass                |                      |                     |                                       | Threa               | .dedX                      |
| YPE OF SCREEN OR PERFORATION MATERIAL:  1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR)  2 Brass 12 None used (open hole)  CREEN OR PERFORATION OPENINGS ARE:  5 Gauzed wrapped 8 Saw cut 11 None (open hole)  1 Continuous slot 5 Mill slot 6 Wire wrapped 9 Drilled holes  2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)  CREEN-PERFORATION INTERVALS: From. 11 to 15 11, From 11 to 11  From. 11 to 14 11, From 11 to 11, From 11 to 11  GROUT MATERIAL: Neat cement 2 Cemest grout 12 Bentonite 11 Cemest source of possible contamination:  1 Septic tank 4 Lateral lines 7 Pit privy  3 Seware lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 15 Oil well/Gas well 15 Contamination:  1 Septic tank 4 Lateral lines 7 Pit privy  3 Wateright sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage 11 Full storage 15 Oil well/Gas well 12 Abandoned water well 12 Central from 10 Contactor's Licenses No. 12 Contactor's Li                         | Blank casing diameter  | ig. to J.S.                                       | ft., Dia , .                  | in. to. ا            | ·                   | ft., Dia                              | i                   | n. to ft.                  |
| YPE OF SCRIEEN OR PERFORATION MATERIAL:  1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify)  2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (spen hole)  1 Continuous slot 5 Mill slot 6 Wire warpped 8 Saw cut 11 None (open hole)  1 Continuous slot 5 Mill slot 6 Wire warpped 9 Drilled holes  2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)  CREEN-PERFORATION INTERVALS: From 30 ft. to 15 ft. From ft. to ft. From ft. ft. ft. ft. ft. From ft. to ft. From ft.  | Casing height above land surface.  | Rush  | in., weight Self              | 1.40                 | Ibs.                | ft. Wall thicknes                     | s or gauge No       | <b>)</b>                   |
| 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole) CREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 8 Saw out 11 None (open hole) 1 Continuous slot  | TYPE OF SCREEN OR PERFORA  | TION MATERIAL:                                    | -                             |                      |                     |                                       |                     |                            |
| CREEN OR PERFORATION OPENINGS ARE:  1 Continuous slot  | 1 Steel 3 Stai   | nless steel                                       | 5 Fiberglass                  | 8 RA                 | IP (SR)             | 11 (                                  | Other (specify)     |                            |
| 1 Continuous slot   2 Louvered shutter   4 Key punched   7 Torch cut   10 Other (specify)   7 Torch cut   10 Other (specify)   11 Each   12 Louvered shutter   13 Diffied holes   14 Key punched   7 Torch cut   15 In. From   15 In. From   16 In. From   17 In.  | 2 Brass 4 Galv   | anized steel                                      | 6 Concrete tile               | 9 AB                 | s                   | 12 N                                  | lone used (ope      | en hole)                   |
| 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) CREEN-PERFORATED INTERVALS From 8 th. to 15 ft., From ft. to 1. ft. From th. to 15 ft., From ft. to 1. ft. From th. to 14 ft., From ft. to 1. ft. From ft. to 15 ft., From ft. to 1. ft. From ft. to 1. ft., From ft. to 1. ft. From ft. to 1. ft., From ft. to 1. ft. From ft. to 1. ft., From ft. to 1. ft. From ft. to 1. ft., From ft. to 1. ft. From ft. to 1. ft., From ft. to 1. ft. From ft. to 1. ft., From ft. to 1. ft. From ft. to 1. ft., From ft. to 1. ft. From     | SCREEN OR PERFORATION OPE  | NINGS ARE:  | 5 Gauz                        | ed wrapped           |                     | 8 Saw cut                             |                     | 11 None (open hole)        |
| CREEN-PERFORATED INTERVALS: From \$\text{it}\$ ft. to \$\text{it}\$ ft. From ft. to ft. From ft. T | 1 Continuous slot  | 3Mill slot  | 6 Wire                        | wrapped              |                     | 9 Drilled hole                        | s                   |                            |
| From the to 14 the From the to the terror to     | 2 Louvered shutter   | 4 Key punched                                     | 7 Torch                       | n cut                |                     | 10 Other (spe-                        | cify)               |                            |
| ### CONTRACTORS OR LANDOWNER'S CERTIFICATION: This water well was **Donstructed*, (2) reconstructed, or (3) plugged under my jurisdiction and was sompleted on (mo/day/year) **3 19 9 9  | SCREEN-PERFORATED INTERVA  | ıLS: From $\dots \mathscr{J}$                     | <i>O </i>                     |                      | ft., Fro            | m                                     | ft. tc              | )                          |
| ### CONTRACTORS OR LANDOWNER'S CERTIFICATION: This water well was **Doonstructed*, (2) reconstructed*, or (3) plugged under my jurisdiction and water well and this record is true to the best of my knowledge and belief. Kansas tater Well Contractor's License No. 505.  ### CONTRACTORS OR LANDOWNER'S CERTIFICATION: This water well was **Doonstructed*, (2) reconstructed*, or (3) plugged under my jurisdiction and water well and this record is true to the best of my knowledge and belief. Kansas tater Well Contractor's License No. 505.  ### CONTRACTORS OR LANDOWNER'S CERTIFICATION: This water well was **Doonstructed*, (2) reconstructed*, or (3) plugged under my jurisdiction and water well and this record is true to the best of my knowledge and belief. Kansas tater Well Contractor's License No. 505.  ### CONTRACTORS OR LANDOWNER'S CERTIFICATION: This water well was **Doonstructed*, (2) reconstructed*, or (3) plugged under my jurisdiction and water well contractor's License No. 505.  #### CONTRACTORS OR LANDOWNER'S CERTIFICATION: This water well was **Doonstructed*, (2) reconstructed*, or (3) plugged under my jurisdiction and water well contractor's License No. 505.  #### CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was **Doonstructed*, (2) reconstructed*, or (3) plugged under my jurisdiction and water well contractor's License No. 505.  #### CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was **Doonstructed*, (2) reconstructed*, or (3) plugged under my jurisdiction and water well may be under the business name of **Tataged PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or croice the correct arrewars. Send to the trace copies to Kansas Department underline or croice the correct arrewars. Send to the correct arrew     | <and< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td></and<> |   |                               |                      |                     |                                       |                     |                            |
| GROUT MATERIAL:  If to 12 ft to 15 ft From 15 ft to 15 ft From 16 ft to 17 ft From 17 ft to 16 ft From 18 ft to 17 ft From 18 ft to 18 ft From 19 ft ft to 18 ft From 19 ft ft to 19 ft From 19 ft ft to 19 ft From 19 ft ft to 10 ft From 19 ft ft ft to 10 ft From 19 ft   |  | ALS: From3  | D ft. to .                    | 1.4                  | ft., Fro            | m                                     | ft. tc              | )                          |
| contractors or Landowner's Certification: This water well was Occurrenced or (2) reconstructed, or (3) plugged under my jurisdiction and water well contractor's License No. 585.  Contractors on Landowner's Certification: This water well was Occurrenced or (mo/day/year). 3 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9   |  | From  | ft. to                        |                      | ft., Fro            | om                                    | ft. to              | ft.                        |
| Abandoned water well 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage 15 Oil well/Gas well 12 Fertilizer storage 15 Oil well/Gas well 15 Oil well/Gas well 12 Fertilizer storage 15 O     | <b>-</b> (a) (d)   | eat cement  |                               | _                    | _                   |                                       |                     |                            |
| 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 13 Insecticide storage Contain in Audio State Plant of Contain in Audio State Plant (State Plant of Contain in Audio State Plant of Contain in      | Grout Intervals 3 From 14  | ft. to12.   | ft(34 rom . 1.2.              | < ft.                | to                  | ft., From                             | <b>.</b>            | . ft. to $\dots\dots$ .ft. |
| 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage 13 Insecticide storage 13 Insecticide storage 14 How many feet?  FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS  CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was ampleted on (mo/day/year) 3 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9   | What is the nearest source of poss   | ible contamination:                               |                               |                      | 10 Lives            | stock pens                            | 14 At               | andoned water well         |
| 3 Waterlight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage CONTUNI MORAGISTALL intended from well? How many feet? FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS  CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was anompleted on (mo/day/year) 3999999999999999999999999999999999999   | 1 Septic tank 4 L  | ateral lines                                      | 7 Pit privy                   |                      | 11 Fuel             | storage                               | ~                   |                            |
| CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ①constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was another of more of my formation o     | 2 Sewer lines 5 (  | Cess pool   | 8 Sewage lag                  | oon                  | 12 Ferti            | lizer storage                         | (16) 01             | her (specify below)        |
| FROM TO CONCLUTE    33 Clay wispamicslit   23 30 SULUW some clay   30 TD   end of boundary   30 TD   end of boundary   30 TD   end of boundary   31 Successful   30 Successful     | 3 Watertight sewer lines 6 S   | Seepage pit                                       | 9 Feedyard                    |                      | 13 Insec            | cticide storage                       | CONTOU              | nivalla sete.              |
| CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (**Disconstructed*, or (3) plugged under my jurisdiction and was completed on (mo'day/year) 3999999999999999999999999999999999999   | Direction from well?   |   |                               |                      | How ma              | iny feet?                             |                     |                            |
| CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ①constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 3999 and this record is true to the best of my knowledge and belief. Kansas later Well Contractor's License No. 585. This Water Well Record was completed on (mo/day/yr) 315799 by (signature) 200 CM  |  |   | LOG                           | FROM                 | то                  |                                       | PLUGGING IN         | ITERVALS                   |
| CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ①constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 3999 and this record is true to the best of my knowledge and belief. Kansas later Well Contractor's License No. 585 This Water Well Record was completed on (mo/day/yr) 31.15199 honder the business name of the later Well Contractor's License No. 585 This Water Well Record was completed on (mo/day/yr) 31.15199 honder the business name of the later Well Record was completed on (mo/day/yr) 31.15199 honder the business name of the later Well Record was completed on (mo/day/yr) 31.15199 honder the business name of the later Well Record was completed on (mo/day/yr) 31.15199 honder the business name of the later Well Record was completed on (mo/day/yr) 31.15199 honder the business name of the later Well Record was completed on (mo/day/yr) 31.15199 honder the business name of the later Well Record was completed on (mo/day/yr) 31.15199 honder the business name of the later Well Record was completed on (mo/day/yr) 31.15199 honder the business name of the later Well Record was completed on (mo/day/yr) 31.15199 honder the business name of the later Well Record was completed on (mo/day/yr) 31.15199 honder the business name of the later Well Record was completed on (mo/day/yr) 31.15199 honder the business name of the later Well Record was completed on (mo/day/yr) 31.15199 honder the business name of the later Well Record was completed on (mo/day/yr) 31.15199 honder the business name of the later Well Record was completed on (mo/day/yr) 31.15199 honder the business name of the later Well Record was completed on (mo/day/yr) 31.15199 honder the business name of the later Well Record was completed on (mo/day/yr) 31.15199 honder the business name of the later Well Record was completed on (mo/day/yr) 31.15199 honder the business name of the later Well Record was completed on (mo/day/yr) 31.15199 honder the later Well Record was completed on (mo/day/yr) 31.15199 honde     | Conc   |   |                               |                      |                     |                                       |                     |                            |
| CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Occupant of the best of my knowledge and belief. Kansas and this record is true to the best of my knowledge and belief. Kansas atter Well Contractor's License No. 585. This Water Well Record was completed on (moiday/yr). 3 15 19.  INSTRUCTIONS: 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.   |  | <del>~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ </del> |                               |                      | <u> </u>            |                                       |                     |                            |
| CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ①constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was ompleted on (mo/day/year) 3999999999999999999999999999999999999   |  | 2] spru Clai                                      | <b>Y</b>                      |                      | ļ                   |                                       |                     |                            |
| INSTRUCTIONS: 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  | 30 TU lend o   | y Dounole   | <u>u</u>                      | <del></del>          |                     |                                       |                     |                            |
| INSTRUCTIONS: 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  |  |   |                               |                      | ļ                   |                                       |                     |                            |
| INSTRUCTIONS: 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  |  |   |                               |                      | <del> </del>        |                                       |                     |                            |
| INSTRUCTIONS: 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  |  |   |                               |                      |                     |                                       |                     |                            |
| INSTRUCTIONS: 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  |  |   |                               |                      | <b> </b>            |                                       |                     |                            |
| INSTRUCTIONS: 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  |  |   |                               |                      |                     | ,                                     |                     |                            |
| INSTRUCTIONS: 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  |  |   |                               |                      | ļ                   |                                       |                     |                            |
| INSTRUCTIONS: 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  |  |   |                               |                      |                     |                                       |                     |                            |
| INSTRUCTIONS: 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  |  |   |                               |                      | <b> </b>            |                                       |                     |                            |
| INSTRUCTIONS: 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  |  | <del></del> -                                     |                               |                      |                     |                                       |                     |                            |
| INSTRUCTIONS: 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  |  |   |                               |                      | ļ                   |                                       |                     |                            |
| INSTRUCTIONS: 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  |  |   |                               |                      | <u> </u>            |                                       |                     |                            |
| INSTRUCTIONS: 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  | 7 CONTRACTOR'S OR LANDOW   | (NER'S CERTIFICA                                  | FION: This water well w       | as (1))constru       | cted, (2) reco      | onstructed, or (3                     | ) plugged unde      | er my jurisdiction and was |
| INSTRUCTIONS: 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  | completed on (mo/day/vear) 3   | 19199   |                               |                      |                     |                                       |                     |                            |
| INSTRUCTIONS: 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  | Water Well Contractor's License No   | 5585  |                               |                      |                     |                                       |                     |                            |
| INSTRUCTIONS: 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  | ^  | - 1   |                               |                      |                     |                                       | ncan Gi             | DDun                       |
| 4 Marks and Fallianness Design (Water Toroite Marcos 0000 0001 Telephone 012 000 6645 Sond one to WATER WELL OWNER and retain one for your records   | INSTRUCTIONS: Use typewriter or ball   | point pen. PLEASE PRESS                           | FIRMLY and PRINT clearly. Ple | ease fill in blanks, | underline or circle | e the correct answers                 | s. Send top three o | opies to Kansas Department |