ATTER WELL RECORD Form WWC-5 Division of Water Resources, App. No.	WATER '	WELL R	ECORD	Forn	a WWC	-5 I	Division o	of Water Res	ources; A	pp. No.	
Contraction Service Se							Sectio	n Number	Town	ship Number	Range Number
WATER WELL OWNER: KDHE (Rabbsons Carage) RRA, St. Address. Box # 1000 SW luckson City, State, ZIP Code Topeda, KS 6612 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL 24 LOCATON WITH AN "N" IN SECTION BOX: N SECTION BOX: N Pump lest data: Well water was fi. after hours pumping gpm Bet. Viold gpn: Well water was gpn: Add conditioning fi. In decided a viold gpn: Well water well gpn: Add conditioning f	County:	Gree	nwood	NE ¼	NW ¼	NW 1/4	Clabal	8 Docitionin	a System	n (decimal dea	rees min of 4 digits)
WATER WELL OWNER: KDHE (Rabbsons Carage) RRA, St. Address. Box # 1000 SW luckson City, State, ZIP Code Topeda, KS 6612 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL 24 LOCATON WITH AN "N" IN SECTION BOX: N SECTION BOX: N Pump lest data: Well water was fi. after hours pumping gpm Bet. Viold gpn: Well water was gpn: Add conditioning fi. In decided a viold gpn: Well water well gpn: Add conditioning f	Distance and	direction	rom nearest town	or city stree	et address	of well II	Global	de 37-	ig systei 58-30	n (accima ace	1000,
WATER WELL OWNER: KDHE (Rohisons Garage) Data Collection Method: legal survey R. MW11 MW11 R. Depth(s) Groundwater Encountered ft. 2	ocated with	in city? 17:	of the N of Cherokee	& Lincoln	Streets, VI	azi ugu	Longi	itude: 96-	00-37		
RXM, St. Address, Box # 1000 SW Jackson Datum: NAVD88 Data NAVD88 City, State, ZIP Code Topeks, KS 66612 Data Collection Method. legal survey			TANTA TANTA	E (Dalisons	Caraga		Eleva	tion: RIN	<u>и: 1000.</u> ′	79; TOC: 100	0.52
Data Collection Method: Segal survey	WATER	WELL O	WNER: KDH	E (Kobisons	Garage)		Datur	n NA	.VD88		
Depth(s) Groundwater Encountered 1	RR#, St.	Address, E	OX # : 1000 S	SW Jackson	.		Data	Collection	Method:	legal survey	
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Kansas Water Well Contractor's License No. 757 This Water Well Record and the business name of Larsen & Associates, Inc. by (signature)	under my in	urisdiction a	nd was completed	on (mo/day/y	ear)	6/22/11		and this reco	ord is true	to the best of	my knowledge and bel
under the business name of Larsen & Associates, Inc.	Voncoc Wo	ter Well ('o	ntractor's Lucense I	NO. /5/	. 11	115 rraici r	TON ILOUD.	rd was comp	pleted on	(mo/day/year)	//41/11
INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, 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	under the h	usiness nam	e of Larsen & A	Associates, 1	Inc.	by ((signature	e)		FK.	
Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATEK WELL OWNER and retain one	INCTOTICT	IONS: Dlane	e fill in blanks or cim	ele the correct a	nswers. Sen	nd top three	copies to K	ansas Depart	ment of N	ealth and Environ	ment, Bureau of Water,
	Geology Sec	tion, 1000 S	V Jackson St., Suite 4	20, Topeka, Ka	ansas 66612-	-1367. Telej	ohone 785-	-296-5522. S ell	end one to	MATER MELL	O WINDIX and retain one