

County: 14 14 14 15 R B 2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance am direction from nearest town or intersection): If at owner's address, check here: Address: Address: Street or Rural Address where well is located (if unknown, distance am direction): If at owner's address, check here: Address: Address: Street or Rural Address where well is located (if unknown, distance am direction): If at owner's address, check here: Address: Street or Rural Address where well is located (if unknown, distance am direction): If at owner's address, check here: Address: Street or Rural Address where well is located (if unknown, distance am direction): If at owner's address, check here: Address: Street or Rural Address where well is located (if unknown, distance am direction): If at owner's address, check here: Number of the Number of Numer of Numer of Number of Number of Number of Numer of	CATION OF WATER WELL: Fraction Section Number Township Number Range Number ELL WATER First: Street or Rural Address where well is located if maknows, distance and direction from nearest town or intersection:: If at owner's address, check here: Street or Rural Address where well is located if maknows, distance and direction from nearest town or intersection:: If at owner's address, check here: V State: ZIP. V A DEPTH OF COMPLETED WELL: f. Depth(c) (forundwater Interounterst: 1) f. 2) State: 2IP. WILL'S STATIC WATER LEVEL: f. f. after: balow land surface, messared on (moday yr) (Maknows) WILL'S STATIC WATER LEVEL: f. f. after: bors pumping gpm Estimated Yiell: gpm f. Street RD Busers in. to f. and f. bors pumping gpm Street RD Busers f. f. Again Recharge well ID 10. field Water Supply: lease action (aday or yr) field water Supply: well TD field Water Supply: lease actin aday or yr) field water Supply: well TD
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Image: Constraint of the system Image: Consthe system Image: Constraintowisyst	ONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was \Box constructed, \Box reconstructed, or \Box plugged my jurisdiction and was completed on (mo-day-year) and this record is true to the best of my knowledge and belief.
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II CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was in constructed, in reconstructed, or in plug under my jurisdiction and was completed on (moday year)	my junistiction and was completed on (mo-day-year) and this feeded is use to the best of the Knowledge and belief.
Kansas Water Well Contractor's License No	as water wen contractor's License two
	the business name of
under the business name of	Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> well.
under the business name of	Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-3565. t us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212