LICACHE WELLS LOCATION WITH AN "X" IN SECTION BOX.			WATER WELL RECORD	Form WWC-5	KSA 828			
stance and depetion from reginest lown or city street address of well if located within city?  ### ATT 44 F 13 th  WATER WELL OWNER ### ATT 57 TO IND IN CO.  ### ATT WELL OWNER ### ATT ATT ATT ATT ATT ATT ATT ATT ATT			•		/ /			1
Re St. Address, Box # \$ 100   150	Distance and direction from	n nearest town or city s						MW-6
Re St. Address, Box # \$ 100   150	WATER WELL OWNER	7: Amoco G	lil Co. D.					
LICATE WELL'S LOCATION WITH A YEAR TO BE COMPLETED WELL. 19 1. 2. 1. 2. 1. 3. 1. 1. 1. 2. 1. 1. 1. 2. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	RR#, St. Address, Box #	: 8700 NDI	AN Creek PARK	MACK		Board o	of Agriculture, D	ivision of Water Resource
USERING JORGANISTE LEVEL 7. It. below land surface measured on molistys.  Well STATIC WERT LEVEL 7. It. below land surface measured on molistys.  Pump test data: Well water was 1. it. after hours pumping. gpt to get the pumping of	City, State, ZIP Code			<u> </u>		Applica	tion Number:	
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of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.	INSTRUCTIONS: Use typewri	iter or ball point pen. PLEASE	PRESS FIRMLY and PRINT clearly. PI	ease fill in blanks.	underline or circle	e the correct answe	rs. Send top three	opies (o Karisa). Department
	of Health and Environment,	Bureau of Water, Topeka, Kar	sas 66620-0001. Telephone: 913-296-	5545. Send one to	WATER WELL O	WNER and retain or	ne for your records	The state of the s