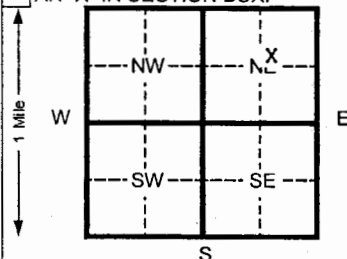


3801 S. Oliver- Wichita, KS 67216 North of 3-193k IBP1

Board of Agriculture, Division of Water Resources

Application Number:

4	DEPTH OF COMPLETED WELL	52.4	ft. ELEVATION:
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2 Irrigation	4 Industrial	7 Lawn and garden (domestic)	10 Monitoring well	Recovery
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Was a chemical/bacteriological sample submitted to Department? Yes _____ No **X** If yes, mo/day/yr sample was submitted _____

Water Well Disinfected? Yes _____ No **X**

10 Other (specify)

13 Insecticide storage

How many feet?	
TO	

[illegible]

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