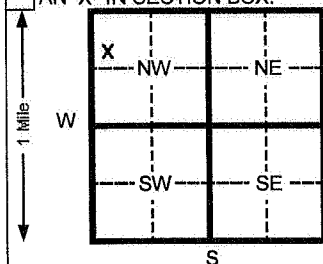


East side of Englewood St., south of MacArthur – Wichita

Application Number:

36.5 ft. ELEVATION:



Was a chemical/bacteriological sample submitted to Department? Yes ☐ No ☒ If yes, mo/day/yr sample was

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**

Flush

10 Other (specify)

1. Cement	2. Cement grout	3. Bentonite	4. Other
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4 Other

13 Insecticide storage

How many feet?

[illegible]

by (signature) 

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.