| Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded (2) PVC 4 ABS 7 Fiberglass 11 Other (specify below) Melded (2) PVC 4 ABS 7 Fiberglass 11 Other (specify below) Melded (2) PVC 4 ABS 7 Fiberglass 11 Other (specify below) Melded (2) PVC (2) Brass 4 Galvanized 5 Fiberglass (7) PVC 2 Brass 4 Galvanized steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole) SCREEN OR PERFORATION MATERIAL 1 Steel 3 Stainless steel 5 Fiberglass (7) PVC 2 Brass 4 Galvanized steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 3 Mill slot 5 Gauze wrapped 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) SCREEN-PERFORATED INTERVALS: From 3 ft. to 9.61 ft. From ft. to | WATER | WELL R | ECORD | Form WWC-5 | Divisi | on of Water I | Resources; App. | No. | | |
|--|--|-------------------|------------------------|--------------------------|-----------------|-------------------------|---------------------|--|--------------------------|--|
| Leartington 17 17 18 18 18 18 18 18 | 1 LOCA' | FION OF W Mont | ATER WELL: | Fraction SE 1/2 SW 1/4 | | | | | | |
| 2 WATER WELLOWKER: KDHE RRY, SLA Address, Box # 1600 SW Jackson Blvd City, State, ZJP Code Toneke KS Data Collection Method: legal survey 1 LOCATON WITH AN "X" IN SECTION BOX: N Depth(s) Groundwater Encountered MW44 WELL'S STATIC WATER LEVEL 5.11 ft. below land surface measured on modayly 7.2313 N | Distance and direction from nearest town or city street address of well if Global Positioning System (decimal degrees, min. of 4 digits) Latitude: 37.00960 | | | | | | | | | |
| RRM, St. Address. Box # 1000 SW Jackson Bivd City, State, LD Code City, | 2 XXATE | D WELL O | WNED. KDHI | 7 | | evation: R | RIM: 762.03: T | OC: 761.8 | 2 | |
| City, State, ZIP Code: Toroke KS LOCATON WITH AN "X" IN SECTION BOX: NOTH AN "X" IN SECTION BOX: WELL'S STATIC WATER LEVEL 6.11, fi, below land surface measured on modal surface measured in the measure measured in the measured on modal surface | RR# St Address Box # : 1000 SW Jackson Blvd | | | | | Datum: WGS84 | | | | |
| 3 LOCATE WELL'S LOCATON WITH AN "X" IN SECTION BOX: Depth(s) Groundwater Encountered 1 WELL'S STATIC WATER LEVEL 6.11. ft. below land surface measured on morday/yr 773/13. Pump test data: Well water was ft. after hours pumping gpm Well water was ft. after hours pumping gpm Usell water was ft. after hours pumping gpm Usell water was ft. after hours pumping gpm Usell water supply 8 Air conditioning 11 Injection well 11 Domestic 3 Feed 10 to 6 Oil field water supply 9 Dewatering 12 Other (Specify below) Tiggiation 4 Industrial 7 Domestic (lawn & gardie (lawn & gardie) (Montioning well 12 Other (Specify below) 15 Steel 3 RMF (SR) 6 Asbestos-Cement 9 Other (specify below) Welded X TYPE OF CASING USED: 5 Wrough Iron 8 Concrete tile CASING JOINTS: Glued Clamped 1 Steel 3 RMF (SR) 6 Asbestos-Cement 9 Other (specify below) Welded X TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 2 Brass 4 Glavanizaed steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole) SCREEN OR PERFORATION OPENINGS AKE: 1 Continuous skot 7 Mills slot 5 Gauze wrapped 1 Converted shutter 1 Key punched 6 Wire wrapped 8 Saw Cut 1 Other (specify) 1 Converted shutter 1 Key punched 6 Wire wrapped 8 Saw Cut 1 Other (specify) 1 Converted shutter 1 Key punched 6 Wire wrapped 8 Saw Cut 1 Other (specify) 1 Converted shutter 1 Key punched 6 Wire wrapped 8 Saw Cut 1 Other (specify) 1 Converted shutter 1 Key punched 6 Wire wrapped 8 Saw Cut 1 Other (specify) 1 Converted shutter 1 Key punched 6 Wire wrapped 8 Saw Cut 1 Other (specify) 1 Converted shutter 1 Key punched 6 Wire wrapped 8 Saw Cut 1 Other (specify) 1 Converted shutter 1 Key punched 6 Wire wrapped 8 Saw Cut 1 Other (specify) 1 Converted shutter 1 Key punched 6 Wire wrapped 8 Saw Cut 1 Other (specify) 1 Converted shutter 1 Key punched 6 Wire wrapped 8 Saw Cut 1 Other (specify) 1 Converted 1 Key punched 6 Wire wrapped 8 Saw Cut 1 Other (specify) 1 Converted 1 Key punched 6 Wire wrapped 1 So Saw Cut 1 Converted 1 Key punched 6 Wire wrapped 1 So | City, St | ate, ZIP Cod | ie : Topek | a KS | | ata Collectio | | gal survey | | |
| WITH AN "X" IN SECTION BOX: N N N N N N N N N N N N N | 3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL 9.61 ft. | | | | | | | | | |
| Pump test data: Well water was fi. after hours pumping gpm well user was first first hours pumping gpm well was a chemical bacteriological sample submitted to Department? Yes No X : If yes, mo/day/yrs water Well Disinfected? Yes No X : If yes, mo/day/yrs water Well Disinfected? Yes No X : If yes, mo/day/yrs water Well Disinfected? Yes No X : If yes, mo/day/yrs water Well Disinfected? Yes No X : If yes, mo/day/yrs water Well Disinfected? Yes No X : If yes, mo/day/yrs water Well Disinfected? Yes No X : If yes, mo/day/yrs water Well Disinfected? Yes No X : If yes, mo/day/yrs Water Well Disinfected? Yes No X : If yes, mo/day/yrs Water Well Disinfected? Yes No X : If yes, mo/day/yrs Water Well Disinfected? Yes No X : If yes, mo/day/yrs Water Well Disinfected? Yes No X : If yes, mo/day/yrs water Well Disinfected? Yes No X : If yes, mo/day/yrs Water Well Disinfected? Yes No X : If yes, mo/day/yrs Water Well Disinfected? Yes No X : If yes, mo/day/yrs Water Well Disinfected? Yes No X : If yes, mo/day/yrs Water Well Disinfected? Yes No X : If yes, mo/day/yrs water Well Disinfected? Yes No X : If yes, mo/day/yrs water Well Disinfected? Yes No X : If yes, mo/day/yrs water Well Disinfected? Yes No X : If yes, mo/day/yrs water Well Disinfected? Yes No X : If yes, mo/day/yrs water Well Disinfected? Yes No X : If yes, mo/day/yrs water Well Disinfected? Yes No X : If yes, mo/day/yrs water Well Disinfected? Yes No X : If yes, mo/day/yrs water water well below? If yes, mo/day/yrs water wa | | | | | | MW4 | 2 | ft 3 | ft | |
| Pump test data: Well water was fi. after hours pumping gpm well user was first first hours pumping gpm well was a chemical bacteriological sample submitted to Department? Yes No X : If yes, mo/day/yrs water Well Disinfected? Yes No X : If yes, mo/day/yrs water Well Disinfected? Yes No X : If yes, mo/day/yrs water Well Disinfected? Yes No X : If yes, mo/day/yrs water Well Disinfected? Yes No X : If yes, mo/day/yrs water Well Disinfected? Yes No X : If yes, mo/day/yrs water Well Disinfected? Yes No X : If yes, mo/day/yrs water Well Disinfected? Yes No X : If yes, mo/day/yrs Water Well Disinfected? Yes No X : If yes, mo/day/yrs Water Well Disinfected? Yes No X : If yes, mo/day/yrs Water Well Disinfected? Yes No X : If yes, mo/day/yrs Water Well Disinfected? Yes No X : If yes, mo/day/yrs water Well Disinfected? Yes No X : If yes, mo/day/yrs Water Well Disinfected? Yes No X : If yes, mo/day/yrs Water Well Disinfected? Yes No X : If yes, mo/day/yrs Water Well Disinfected? Yes No X : If yes, mo/day/yrs Water Well Disinfected? Yes No X : If yes, mo/day/yrs water Well Disinfected? Yes No X : If yes, mo/day/yrs water Well Disinfected? Yes No X : If yes, mo/day/yrs water Well Disinfected? Yes No X : If yes, mo/day/yrs water Well Disinfected? Yes No X : If yes, mo/day/yrs water Well Disinfected? Yes No X : If yes, mo/day/yrs water Well Disinfected? Yes No X : If yes, mo/day/yrs water Well Disinfected? Yes No X : If yes, mo/day/yrs water water well below? If yes, mo/day/yrs water wa | I. | | Depth(s) Grou | ndwater Encountered I | 611 ft 1 | II. | urface measure | ed on mo/d | lav/vr 7/3/13 | |
| Est. Yield gpm: Well water was to a far the first in the first plants and the first plants an | SECTI | | WELL'S STA | n tost data: Well water | 0.11 11. | ociow ianu s ft afte | er he | ours numpi | ing gpm | |
| WELL WATER TO BE USED AS: 5 Public water supply 8 Air continuum 17 Injection were supply 8 Air continuum 18 Injection were supply 8 Injection was completed on (modiasy) early 10 Livestock pens 13 Insecticide Storage 16 Other (specify 19 Injection from well? 8 Injection and was completed on (modiasy) early 10 Injection from well? 8 Injection and was completed on (mod | | | Fot Vield | onm: Well water | was | ft. afte | er ho | ours pump | ing gpm | |
| 1 Domestic 3 Feed lot 6 Oil field water supply 2 Dewatering 12 Other (Specify below) | L NIVA | | | R TO RETIGED AS: 5 | Public water | r supply – 8 | s Air condition | $\mathbf{m}\mathbf{z}$ ii \mathbf{m} | njechon wen | |
| Variety Vari | | | 1 Domestic 3 | Feed lot 6 Oil field | water supply | , <u>9</u> I | Dewatering | 12 Oth | er (Specify below) | |
| Was a chemical/bacteriological sample submitted to Department? Yes Sample was submitted to Water Well Dissinfected? Yes No X Type OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued Clamped 2 PVC 4 ABS 7 Fiberglass Threaded X Threaded X Since of the Casing diameter 2 in. to 3 ft., Dia in. to ft. Dia in. to ft. Dia in. to ft. Casing height below land surface 0.21 ft., Weight Ibs/ft. Wall thickness or gauge No. TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass DPVC 9 ABS 11 Other (specify) SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 2 Mill slot 5 Gauze wrapped 8 Saw Cut 10 Other (specify) SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 2 Louvered shutter | W I | | E 2 Irrigation 4 | Industrial 7 Domestic | (lawn & ga | rden) (10) N | Monitoring wel | 1 | | |
| Was a chemical/bacteriological sample submitted to Department? Yes No X Types, Mod Yis | -sw | -sw-sE- | | | | | | | | |
| STYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Gleued Clamped 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) | | \perp_{s} | Sample was si | ıbmitted | | Wate | er Well Disinte | cted? Yes | No X | |
| Direction from well? Sewer lines Sewer | 5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued Clamped | | | | | | | | | |
| Direction from well? Sewer lines Sewer | 1 Stee | el 3 | RMP (SR) 6 | Asbestos-Cement | 9 Other (sp | ecify below | 7) | Welde | ed | |
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| 1 Steel 3 Statisliess steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 3 Mill slot 5 Gauze wrapped 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) SCREEN-PERFORATED INTERVALS: From 3 ft. to 9.61 ft. From ft. to ft. From ft | Blank casing diameter 2 in. to 3 ft., Dia in. to tt., Dia in. to the North All the Nor | | | | | | | | | |
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| SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot | 1 Steel 3 Stainless steel 5 Fiberglass (7) PVC 9 ABS 11 Other (specify) | | | | | | | | | |
| SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot | 2 Brass 4 Galvanized steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole) | | | | | | | | | |
| GRAVEL PACK INTERVALS: From 2 ft. to 9.80 ft. From ft. to ft. | | | | | | | | | | |
| GRAVEL PACK INTERVALS: From 2 ft. to 9.80 ft. From ft. to ft. | 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) | | | | | | | | | |
| GRAVEL PACK INTERVALS: From 2 ft. to 9.80 ft. From ft. to ft. | SCREEN-PERFORATED INTERVALS: From 3 ft. to 9.61 ft. From ft. to ft | | | | | | | | | |
| GROUT MATERIAL: 1 Neat cement 2 Cement grout Grout Intervals From 1 ft. to 2 ft. From ft. to ft. To ft. To ft. To ft. To ft. To ft. From ft. To ft. To ft. To ft. To ft. To ft. To ft. From ft. To ft. | | | | From | ft. to | ft | t. From | ft. | to ft. | |
| GROUT MATERIAL: 1 Neat cement 2 Cement grout Grout Intervals From 1 ft. to 2 ft. From ft. to ft. From ft. The | GR. | AVEL PACI | K INTERVALS: | From 2 | ft. to | 9.80 ft | t. From | It. | to II. | |
| GROUT MATERIAL: 1 Neat cement 2 Cement grout Grout Intervals From 1 ft. to 2 ft. From ft. to ft. From ft. The | | | | From | ft. to | | t. From | n. | to II. | |
| Grout Intervals From 1 ft. to 2 ft. From ft. to ft. What is the nearest source of possible contamination: 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify 2 Sewer lines 5 Cess pool 8 Sewage lagoon (1) Fuel storage 14 Abandoned water well below) 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/ gas well How many feet? ~50ft FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS 0 8 Grass on top; Brown silty clay 8 9 Tan shale 9 9.8 Limestone Flushmount waiver from BOW 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (Donsfructed (2) peonstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 6/14/13 and this record/state to the test of my knowledge and belie Kansas Water Well Contractor's License No. 757 This Water Well Record was completed on the first of the test of my knowledge and belie (Sansas Water Well Contractor's License No. 757 This Water Well Record was completed on the first of the first of my knowledge and belie (Sansas Water Well Contractor's License No. 757 This Water Well Record was completed on the first of the firs | GROUP MATERIAL. 1 Neat coment 2 Coment group (3 Rentonite (4)Other Concrete: 0-1 ft | | | | | | | | | |
| What is the nearest source of possible contamination: 1 Septic tank | Grout Intervals From 1 ft. to 2 ft. From ft. to ft. From ft. to ft. From ft. to ft. | | | | | | | | | |
| 2 Sewer lines 5 Cess pool 8 Sewage lagoon (1) Fuel storage 14 Abandoned water well below) 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/ gas well Direction from well? S How many feet? ~50ft FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS 0 8 Grass on top; Brown silty clay 8 9 Tan shale 9 9.8 Limestone 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Deonstructed (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 6/14/13 and this record is true to the test of my knowledge and belie Kansas Water Well Contractor's License No. 757 This Water Well Record was completed of trio day/year) 7/15/13 under the business name of Larsen & Associates, Inc. by (signature) INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three corject is Kansas Department of Nath and Environment, Bureau of Water, Carelow, Section 1000 SW Jackson St. Suite 420 Tongela, Kansas 66(12-1367, Telephone 785-296-5522. Send one to TER WELL OWNER and retain one for | What is the nearest source of possible contamination: | | | | | | | | | |
| 3 Watertight sewer lines 6 Seepage pit 9 Feedyard Direction from well? S FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS 8 Grass on top; Brown silty clay 8 9 Tan shale 9 9.8 Limestone Flushmount waiver from BOW 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (Deonstructed (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) Kansas Water Well Contractor's License No. 757 This Water Well Record was completed on the feet of my knowledge and belie was water well business name of Larsen & Associates, Inc. TNSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of National Text and Environment, Bureau of Water, Capalous Section 1008 W lackson St. Suite 420 Topeks Kansas 666[2-1367, Telephone 785-296-5522. Send one to the FER WELL OWNER and retain one for the correct answers. | 1 Septic talik 4 Lateral lines / Tit privy | | | | | | | | | |
| Direction from well? S | | | | | 12 Fertilize | | | | | |
| FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS 8 9 Tan shale 9 9.8 Limestone Flushmount waiver from BOW 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Donstructed Treonstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) Kansas Water Well Contractor's License No. 757 Instructions: This Water Well Record was completed on the business name of Larsen & Associates, Inc. INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Nath and Environment, Bureau of Water, Genlow Section, 1000 SW Jackson St. Suite 420 Toneka Kansas 66(12-1367, Telephone 785-296-5522. Send one to Water Well OWNER and retain one for | 5 Without But by the American Company of the Compan | | | | | | | | | |
| 8 9 Tan shale 9 9.8 Limestone Flushmount waiver from BOW 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Constructed (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 6/14/13 and this record is true to the test of my knowledge and belie Kansas Water Well Contractor's License No. 757 . This Water Well Record was completed on the test of my knowledge and belie Kansas Water Well Contractor's License No. 757 . This Water Well Record was completed on thio day/year) 7/15/13 under the business name of Larsen & Associates, Inc. by (signature) INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of the thin and Environment, Bureau of Water, Gealagu Sention 1000 SW Jackson St. Suite 420 Topeka Kansas 66612-1367, Telephone 785-296-5522. Send one to Water Well COWNER and retain one for | | | · · | | FROM | TO | PLUG | GING INI | ERVALS | |
| Flushmount waiver from BOW 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Deonstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) Kansas Water Well Contractor's License No. 757 This Water Well Record was completed on (mo/day/year) INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of the Wall and Environment, Bureau of Water, Geology Section 1000 SW Jackson St. Suite 420 Topeka Kansas 66612-1367. Telephone 785-296-5522. Send one to TER WELL OWNER and retain one for | | | | | | | | | | |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 6/14/13 and this record is true to the best of my knowledge and belie Kansas Water Well Contractor's License No. 757 This Water Well Record was completed on (mo/day/year) 7/15/13 under the business name of Larsen & Associates, Inc. by (signature) INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Vication and Environment, Bureau of Water, Geology Section 1000 SW Jackson St. Suite 420 Topeka Kansas 66(12-1367, Telephone 785-296-5522. Send one to TER WELL OWNER and retain one for | | | | | | | | | | |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 6/14/13 and this record is true to the best of my knowledge and belie Kansas Water Well Contractor's License No. 757 This Water Well Record was completed on (mo/day/year) 7/15/13 under the business name of Larsen & Associates, Inc. by (signature) INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Virginian and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St. Suite 420 Topeka Kansas 66(12-1367, Telephone 785-296-5522. Send one to TER WELL OWNER and retain one for | 9 | 9.8 | imestone | | | | | | | |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 6/14/13 and this record is true to the best of my knowledge and belie Kansas Water Well Contractor's License No. 757 This Water Well Record was completed on (mo/day/year) 7/15/13 under the business name of Larsen & Associates, Inc. by (signature) INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Virginian and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St. Suite 420 Topeka Kansas 66(12-1367, Telephone 785-296-5522. Send one to TER WELL OWNER and retain one for | | | | | | | | | | |
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| under the business name of Larsen & Associates, Inc. by (signature) INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of the Ath and Environment, Bureau of Water, Geology Section, 1000 SW, Jackson St., Suite 420. Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to the TER WELL OWNER and retain one for | under my ju | risdiction and | l was completed on | (mo/day/year) | 14/13 | and this rec | SOLD ASTRAC TO THE | PUCSI OLILIY | MIOWICUEC MING COMO | |
| INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of the th and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367, Telephone 785-296-5522. Send one to TER WELL OWNER and retain one for | undon the h | ininger name | of Larson & As | sociates Inc. | by (signati | re) | | | | |
| 1 Geology Section 1000 SW Jackson St. Stufe 470 Toneka Kansas 00012-1307, Telephone 703-230-3322, Schild one to 171 Electronic to 171 Elec | | | | A 11 | Alama amaiga to | Vancoa Donat | rtment of the th ar | d Environme | ent, Bureau of Water, | |
| | Canlogy Sec | tion 1000 SW | Jackson St., Stufe 421 | Loneka Kansas oob12-130/ | . Telephone / | 3J-LプU-JJLL. L | Send one to WATE | K WELLO | WINER and retain one for | |