| WELL WATER TO BE USED AS: 5 Public water supply 9 Devalering 12 Other (Specify below) 1 Domestic 3 Feed lot 6 Oil field water supply 9 Devalering 12 Other (Specify below) 10 Monitoring well WiW-5 | | V/A | TER WELL RECORD | Form WWC-5 | KSA 82a-12 | | or hear | Dange Nivers |
|--|--|--|--|---|----------------------|---------------------------|------------------|---|
| LINE CONTROLL CANCER. City of Horton co right steel accesses wheat if coldes within city? "I "Ave East 8.3" St. Horton, KS Application humans and application horn related to the control of the contro | LOCATION OF WATER WE | LL: Fraction | CIAL S | ; | | | | * |
| ## TF WELL OWNER: City of Horton of 5 Tim Lentz ## SEARCHER Rox # 208 6 8" St. ## DEPTH OF COMPLETED WELL ## 20 | ounty Erown | S= ½ | 5/V 1/4 3 | od within city? | აა | <u> </u> | 3 | N 11 |
| Major Stand Park Stand Pa | | | 1° Ave East & | ed within city? . 3 rd St., Horto | n, KS | | | |
| Major Stand Park Stand Pa | WATER WELL OWNER: | City of Horton c/o | Tim Lentz | | | | | |
| STATE PROCESS HONTON, NS 66439 Septing Complete DWELL 20 6 ELEVATION 1016.55 | R# St Address.Box # : 2 | 208 E 8"' St. | | | | Board of Agricu | Iture, Division | of Water Resource |
| COLATE WELLS LOCATON WITH DEPTH OF COMPLETED WELL 20 ELEVATION 1016.85 | ity State ZIP Code : | lorton, KS 66439 | | | | Application Nun | nber: | |
| Depth(s) Groundwater Encountered 1.5 | LOCATE WELL'S LOCATO | | | 20 | f. = = \ | ATION | 1016 | 3.85 |
| Note | JAN X IN SECTION BOX. | 1 1001 111 01 | COMPLETED WELL | 20 | π. ΕΕΕν | ATION: | | |
| Note | N | Depth(s) Grour | ndwater Encountered | 1.5 |) ^{ft} . | 2 | Il. 3 | 44140144 |
| Note | | WELL'S STAT | IC WATER LEVEL | 7.72 ft. | below land s | ufface measured or | n mo/day/yr | 11/16/14 |
| Some in the property of the | NWNE | Pur | mp test data: Well w | ater was | F | . after | . hours pump | oing Gpr |
| Series Hole Diameter 8,5 n. to 20 ft. and n. to n. to 11 injection well 12 tropation 12 tropation 12 tropation 13 tropation 14 tropation 14 tropation 15 tropation 15 tropation 15 tropation 16 tropation 16 tropation 16 tropation 17 tropation 18 tropation | | Est. Yield | Gpm: Well w | ater was | F | i. after | _ Hours pump | pingGpr |
| SW SE | ₩ .v | E Bore Hole Diar | neter 8.5 In. | to 20 |) | ft. and | in. to | . <u> </u> |
| 2 Infigation 4 Industrial 7 Lawn and garden (domestic) 10 Monitoring well NWY-5 Was a chemicalibacteriological sample submitted to Department? Yes No X If yes, moldaylyr sample was Submitted Submitted to Department? Yes No X If yes, moldaylyr sample was Submitted to Department? Yes No X If yes, moldaylyr sample was Submitted to Department? Yes No X If yes, moldaylyr sample was Submitted to Department? Yes No X If yes, moldaylyr sample was Submitted to Department? Yes No X If yes, moldaylyr sample was Submitted to Department? Yes No X If yes, moldaylyr sample was No X If yes, moldaylyr sample was No X If yes, moldaylyr sample was Submitted to Department? Yes No X If yes, moldaylyr sample was No X If yes, moldaylyr yes, No X If ye | | WELL WATER | TO BE USED AS: | 5 Public water su | ypply | 8 Air conditioni | ing 11 lnj | jection well ther (Specify below) |
| Was a chemical/bacteriological sample submitted to Department? Yes No X . If yes moriday/yr sample was Submitted Submitted to Department? Yes No X . If yes moriday/yr sample was Submitted to Department? Yes No X . If yes moriday/yr sample was Submitted to Department? Yes No X . If yes moriday/yr sample was Submitted to Department? Yes No X . If yes moriday/yr sample was No X . If yes was No X . If yes was No X . If yes moriday/yr sample was No X . If yes work no X . If yes no X . If | SW SE | 1 Domes | (IC 3 Feed lot | 7 Levis and sard | on (domostic |) 10 Monitoring | wall 2 | MW-5 |
| Type OF BLANK CASING USED: 5 Wrought Iron 8 Concrete tille CASING JOINTS: Glued Clamped 1 Steel 3 RMF (SR) 6 Asbestos-Cement 9 Other (specify below) Welded X Filter 1 | ↓ x | | | | | | | |
| TYPE OF BLANK CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued Clamped 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specifly below) Welded X Flueriges Threaded X Threade | S | 1 | al/bacteriological sam | ole submitted to L | | | | |
| Steel | | | 5 144 | 9 Canass | | | | |
| 2 PVC | J | | | | | MOL DNICAO | \Maldad | Olalliped |
| File | | , , | | | , , | | Than a | 7 × |
| ank casing diameter 2 in . to 10 Dia in . to . ft., busing height above land surface FLUSH in , weight SCH 40 Lbs.ft. Wall thickness or gauge No | The second secon | _ | _ * | | | | | |
| LISJIT. Was inches or grage Not proposed and surface PLUSH In, weight Described Not proposed to the proposed Screen Perconation Materials: 1 Steel 3 Stainless steel 5 Fiberglass 8 RMF (SR) 11 Other (specify) 2 Brass 4 Galvanized steel 5 Fiberglass 8 RMF (SR) 11 Other (specify) 1 Continuous slot 3 Mill slot 5 Gourcete tile 9 ABS 12 None used (open hole) 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) From 1 t. to 1 t. From 1 t. to 10 ther (specify) From 1 t. to 1 t. From 1 t. to Fit. SAND PACK INTERVALS: From 8 t. to 20 t. From 1 t. to From 1 t. to Fit. From 1 t. to 5 t. From 1 t. to From 1 t. to Fit. From 1 t. to 5 t. From 1 t. to Fit. From 1 t. to 6 From 1 t. to Fit. From 1 t. to 6 From 1 t. to Fit. From 1 t. to 6 From 1 t. to Fit. From 1 t. to 6 From 1 t. to Fit. From 1 t. to 6 From 1 t. to Fit. Sand Pack INTERVALS: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other From 1 t. to Fit. From 1 t. to 6 From 1 t. to Fit. From 1 t. to 6 From 1 t. to Fit. Septic tank 4 Lateral lines 7 Pit privy 11 Field storage 15 Oil well Gas well 1 Septic tank 4 Lateral lines 7 Pit privy 11 Field storage 15 Oil well Gas well 1 Contamination: 1 Topsoil | llank enging diameter | 2 in to 1 | O Dia | In t | 0 | ft., Dia | in. f | to ff |
| 1 Steel 3 Stainless steel 5 Fiberglass 8 RMF (SR) 11 Other (speelfy) 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole) REEN OR PERFORATION OPENINGS ARE 5 Gauzed wrapped 8 Saw cut 11 None (open hole) 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (speelfy) REEN-PERFORATED INTERVALS: From | stank castrig diameter | FLUSH | In weight | SCH 40 | Lbs/ft | Wall thickness or o | gauge No. | |
| 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole) REEN OR PERFORATION OPENNOS ARE: 5 Gauzed wrapped 8 Saw cut 11 None (open hole) 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) REEN-PERFORATED INTERVALS: From 10 ft. to 20 ft. From ft. to ft. SAND PACK INTERVALS: From 8 ft. to 20 ft. From ft. to Ft. From ft. to ft. From ft. to Ft. From ft. to ft. From ft. to ft. From ft. to Ft. From ft. to ft. From ft. to ft. From ft. to Ft. From ft. to ft. From ft. to ft. From ft. to Ft. From ft. to ft. From ft. to ft. From ft. to Ft. From ft. to ft. From ft. to ft. From ft. to Ft. From ft. to ft. From ft. to Ft. From ft. to ft. From ft. to Ft. From ft. to ft. From ft. to Ft. From ft. to ft. From ft. to Ft. From ft. to ft. From ft. to Ft. From ft. to ft. From ft. to Ft. From ft. to ft. From ft. to Ft. From ft. to ft. From ft. to Ft. From ft. to ft. From ft. to Ft. From ft. to ft. From ft. to Ft. From ft. to ft. From ft. to Ft. From ft. to ft. From ft. to Ft. From ft. to ft. From ft. to ft. Ft. From ft. to ft. From ft. to ft. From ft. to ft. From ft. to ft. From ft. to ft. Ft. From ft. to ft. From ft. to ft. Ft. From ft. to ft. From ft. to ft. Ft. From ft. to ft. From ft. to ft. Ft. From ft. to ft. From ft. to ft. Ft. From ft. to ft. From ft. to ft. Ft. From ft. to ft. From ft. to ft. Ft. From ft. to ft. From ft. to ft. Ft. From ft. to ft. From ft. to ft. Ft. From ft. to ft. From ft. to ft. From ft. to ft. From ft. to ft. Ft. From ft. to ft. From ft. to ft. Ft. From ft. to ft. From ft. to ft. Ft. From ft. to ft. From ft. to ft. Ft. From ft. to ft. From ft. to ft. Ft. From ft. to ft. From ft. to ft. From ft. to ft. Ft. From ft. to ft. From ft. to ft. From ft. to ft. From ft. to ft. From ft. to ft. From ft. to ft. From ft. | | | III., Worght | 7 | PVC | 10 Asbes | stos-cement | |
| 2 Brass | | Stainless steel | 5 Fiberalass | | | | | |
| REEN-PERFORATION OPENINGS ARE: 1 Continuous slot 2 Couvered shutter 4 Key punched 7 Torch out 10 Other (specify) 11 None (open hole) 12 Couvered shutter 4 Key punched 7 Torch out 10 Other (specify) 11 None (open hole) 12 Couvered shutter 4 Key punched 7 Torch out 10 Other (specify) 11 None (open hole) 12 Couvered shutter 4 Key punched 7 Torch out 10 Other (specify) 11 None (open hole) 12 Couvered shutter 13 None (open hole) 14 None (open hole) 15 Couvered shutter 15 Couvered shutter 16 None (open hole) 17 Torch out 18 Saw cut 19 Other (specify) 10 Other (specify) 11 None (open hole) 12 None (open hole) 13 None (open hole) 14 None (open hole) 15 Couvered shutter 16 None (open hole) 17 Torch out 18 Saw cut 19 Other (specify) 18 Saw cut 19 Other (specify) 18 Saw cut 19 Other (specify) 19 Sam tonite 10 Other (specify) 10 Will Gas well 11 None (open hole) 12 Service on the tother (specify) 13 Insecticides storage 14 Abandoned water well 15 Couver (specify) 16 Other (specify) 17 Ford (specify) 18 Sewage lagoon 19 Feedyard 10 Livestor page 16 Other (specify) 17 Ford (specify) 18 Sewage lagoon 19 Feedyard 10 Sever lines 10 Other (specify) 10 Other (specify) 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Couver (specify) 16 Other (specify) 17 Ford (specify) 18 Sewage lagoon 19 Ferdyard 10 Sever lines 10 Other (specify) 10 Other (specify) 10 Other (specify) 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Couver (specify) 16 Other (specify) 17 Ferdyard 18 Sewage lagoon 19 Ferdyard 19 Ferdyard 10 Sewage lagoon 10 Sewage lagoon 11 Fordyard 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Couver (specify) 16 Other (specify) 17 Ferdyard 18 Ferdyard 19 Ferdyard 19 Ferdyard 19 Ferdyard 10 Other (specify) 10 Well Case 10 Other (specify) 10 Well Case 10 Other (specify) 10 Well Case 10 Other (specify) 10 W | 1 Steel 3 | Gaivanized steel | 6 Concrete tile | 9 | ABS | 12 None | used (open ho | ole) |
| 1 Continuous sixt 3 Milli slot 6 Wire wrapped 9 Drilled holes 2 Louvered shutter 4 Key punched 7 Torch cut 3 REEN-PERFORATED INTERVALS: From 10 11 10 | | | 5 G | auzed wrapped | | 8 Saw cut | 11 | None (open hole) |
| 2 Louvered shutter | | | | | | 9 Drilled holes | | |
| REEN-PERFORATED INTERVALS: From 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. | | 4 Key punched | 7 T | orch cut | | 10 Other (specif | y) | . |
| From ft. to ft. ft. from ft. ft. from ft. to ft. | | RVALS: From | 10 ft. to | 20 | | | | |
| SAND PACK INTERVALS: From 8 ft. to 20 ft. From ft. to Ft. From | JONEZH Y ZINI GIGINZG MILE | From | ft. to | | ft. F | rom | ft. to | F |
| From ft. to ft. From ft. to ft. From ft. to Ft. GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other out Intervals From 2 0.5 ft. to 6 Ft. From 6 to 8 ft. From ft. to ft. hat is the nearest source of possible contamination: 10 Livestock pens 14 Abandoned water well 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/ Gas well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below) 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage How many feet? FROM TO CODE LITHOLOGIC LOG FROM TO PLUGGING INTERVALS 0 1 Topsoil 2 Topsoil | CAND DACK INTERVA | IS: From | 8 ft. to | 20 | ft. F | rom | ft. to | F |
| GROUT MATERIAL: 1 Neat cement 2 Cement grout FI. FI. FI. B. B. FI. FI. B. FI. B. FI. B. FI. | SANDINORMITERW | | | | | | | |
| out Intervals From 10 to 16 to 6 to 8 ft. From 11 to 15 to 16 to 18 to 16 to 19 to 1 | S CDOUT MATERIAL | | | | | | | |
| hat is the nearest source of possible contamination: 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/ Gas well 2 Sewer lines 5 Cess pool 8 Sewage lagon 12 Fertilizer storage 16 Other (specify below) 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage 16 Other (specify below) Contaminated Site 16 PLUGGING INTERVALS 17 PLUGGING INTERVALS 18 PLUGGING INTERVALS 19 PLUGGING INTERVALS 19 PLUGGING INTERVALS 19 PLUGGING INTERVALS 10 TD Enc of Borehole 10 TO CODE Enc of Borehole 10 Contaminated Site 10 Contaminated Site 10 Contaminated Site 11 PLUGGING INTERVALS 10 TO PLUGGING INTERVALS 10 TD Enc of Borehole 10 Contaminated Site 10 Contaminated Site 10 Contaminated Site 10 Contaminated Site 11 Contaminated Site 12 Contaminated Site 13 Insecticide storage 14 Adamdoned water well was severage and select of the season of the second service of the season of the sea | | | Ft. | Ft. | | | | |
| 1 Septic tank 2 Sewer lines 5 Cess pool 8 Sewage lagocn 12 Fertilizer storage 15 Oll well/ Gas well 2 Sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage FROM TO CODE LITHOLOGIC LOG FROM TO PLUGGING INTERVALS 0 1 Topsoil 1 20 Clay 20 TD End of Borehole | Grout Intervals From2 |).5 ft. to 6 | From3 | 6 to | 8 | | | |
| 2 Sewer lines 5 Cess pool 8 Sewage lagocn 12 Fertilizer storage 16 Other (specify below) 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage Contaminated Site How many feet? FROM TO CODE LITHOLOGIC LOG FROM TO PLUGGING INTERVALS 0 1 Topsoil 1 20 Clay 9 9 Feedyard 19 Feedyard 19 Feedyard 19 Feedyard 19 Feedyard 19 Feedyard 19 From 19 | What is the nearest source of p | | | | | | | |
| 3 Waterlight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage Contaminated Site rection from well? FROM TO CODE LITHOLOGIC LOG FROM TO PLUGGING INTERVALS 0 1 Topsoil 1 20 Clay 20 TD Enc of Borehole Contractor Sor Landowner's Certification: This water well was (x) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and wompleted on (mo/day/yr) 10/21/14 And this record is true to the best of my knowledge and belief. Kansas after Well Contractor's License No. Associated Environmental, Inc. By (signature) Braciley J Johnson InstruCutions: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment Please (1) Topsoil Straucutions Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment Please (1) Topsoil Associated Environmental, Inc. By (signature) Braciley J Johnson Instruction Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment Please fill in blanks and circle the correct answers. | 1 Septic tank | 4 Lateral line: | s 7 Pit p | rivy | 11 Fuels | torage | 15 Oil well | / Gas well |
| To code company the company of the c | 2 Sewer lines | 5 Cess pool | 8 Sew | age lagocn | 12 Fertili | zer storage | | |
| FROM TO CODE LITHOLOGIC LOG FROM TO PLUGGING INTERVALS 0 1 Topsoil 1 20 Clay 20 TD Enc of Borehole | 3 Watertight sewer lines | 6 Seepage pi | it 9 Fee | dyard | 13 Insect | icide storage | Conta | minated Site |
| O 1 Topsoil 1 20 Clay 20 TD Enc of Borehole JCONTRACTOR S OR LANDOWNER'S CERTIFICATION: This water well was (x) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and w completed on (mo/day/yr) Topsoil And this record is true to the best of my knowledge and belief. Kansas are the Well Contractor's License No. This Water Well Record was completed on (mc/day/yr) This Water Well R | Direction from well? | | | | How many | feet? | | |
| 1 20 Clay 20 TD Enc of Borehole DONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (x) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and w completed on (mo/day/yr) 10/21/14 And this record is true to the best of my knowledge and belief. Kansas and acter Well Contractor's License No. 585 This Water Well Record was completed on (mo/day/yr) 10/20/15 This Water Well Record was completed on (mo/day/yr) 10/10/15 This Water Well Record was completed on (mo/day/yr) 10/10/15 This Water Well Record was completed on (mo/day/yr) 10/10/15 This Water Well Record was completed on (mo/day/yr) 10/10/15 This Water Well Record was completed on (mo/day/yr) 10/10/15 This Water Well Record was completed on (mo/day/yr) 10/10/15 This Water Well Record was completed on (mo/day/yr) 10/10/15 This Water Well Record was completed on (mo/day/yr) 10/10/15 This Water Well Record was completed on (mo/day/yr) 10/10/15 This Water Well Record was completed on (mo/day/yr) 10/10/15 This Water Well Record was completed on (mo/day/yr) 10/10/16/15 This Water Well Record was completed on (mo/day/yr) 10/10/16/15 This Water Well Record was completed on (mo/day/yr) 10/10/16/15 This Water Well Record was completed on (mo/day/yr) 10/10/16/15 This Water Well Record was completed on (mo/day/yr) 10/10/16/15 This Water Well Record was completed on (mo/day/yr) 10/10/16/15 This Water Well Record was completed on (mo/day/yr) 10/10/16/15 This Water Well Record was completed on (mo/day/yr) 10/10/16/15 This Water Well Record was completed on (mo/day/yr) 10/10/16/15 This Water Well Record was completed on (mo/day/yr) 10/10/16/15 This Water Well Record was completed on (mo/day/yr) 10/10/16/15 This Water Well Record was completed on (mo/day/yr) 10/10/16/15 This Water Well Record was completed on (mo/day/yr) 10/10/16/15 This Water Well Record was completed on (mo/day/yr) 10/10/16/15 This Water Well Record was completed on (mo/day/yr) 10/10/16/15 This Water Well Record was complete | FROM TO COL | DE LITHO | DLOGIC LOG | FROM | то | PLU | GGING INTER | RVALS |
| TD Enc of Borehole Contractor's License No. | 0 1 | Topsoil | | | | | | |
| CONTRACTOR S OR LANDOWNER'S CERTIFICATION: This water well was (x) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and w completed on (mo/day/yr) 10/21/14 And this record is true to the best of my knowledge and belief. Kansas rater Well Contractor's License No. 585 This Water Well Record was completed on (mo/day/yr) 10/108/15 This Water Well Record was completed on (mo/day/yr) 10/108/15 This Water Well Record was completed on (mo/day/yr) 10/108/15 This Water Well Record was completed on (mo/day/yr) 10/108/15 This Water Well Record was completed on (mo/day/yr) 10/108/15 This Water Well Record was completed on (mo/day/yr) 10/108/15 This Water Well Record was completed on (mo/day/yr) 10/108/15 This Water Well Record was completed on (mo/day/yr) 10/108/15 This Water Well Record was completed on (mo/day/yr) 10/108/15 This Water Well Record was completed on (mo/day/yr) 10/108/15 This Water Well Record was completed on (mo/day/yr) 10/108/15 This Water Well Record was completed on (mo/day/yr) 10/108/15 This Water Well Record was completed on (mo/day/yr) 10/108/15 | | | | | | | | |
| ompleted on (mo/day/yr) 10/21/14 And this record is true to the best of my knowledge and belief. Kansas stater Well Contractor's License No. 585 This Water Well Record was completed on (mo/day/yr) 01/08/15 and the business name of Associated Environmental, Inc. By (signature) Braciley J. Johnson INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment. | 20 TD | End of Boreh | ole | | | | | |
| ompleted on (mo/day/yr) 10/21/14 And this record is true to the best of my knowledge and belief. Kansas stater Well Contractor's License No. 585 This Water Well Record was completed on (mo/day/yr) 01/08/15 and the business name of Associated Environmental, Inc. By (signature) Braciley J. Johnson INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment. | | | | | - | | | |
| ompleted on (mo/day/yr) 10/21/14 And this record is true to the best of my knowledge and belief. Kansas stater Well Contractor's License No. 585 This Water Well Record was completed on (mo/day/yr) 01/08/15 and the business name of Associated Environmental, Inc. By (signature) Braciley J. Johnson INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment. | | | | | - | | | |
| ompleted on (mo/day/yr) 10/21/14 And this record is true to the best of my knowledge and belief. Kansas stater Well Contractor's License No. 585 This Water Well Record was completed on (mo/day/yr) 01/08/15 and the business name of Associated Environmental, Inc. By (signature) Braciley J. Johnson INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment. | | | | | - | | | |
| ompleted on (mo/day/yr) 10/21/14 And this record is true to the best of my knowledge and belief. Kansas stater Well Contractor's License No. 585 This Water Well Record was completed on (mo/day/yr) 01/08/15 and the business name of Associated Environmental, Inc. By (signature) Braciley J. Johnson INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment. | | | | | + | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| ompleted on (mo/day/yr) 10/21/14 And this record is true to the best of my knowledge and belief. Kansas stater Well Contractor's License No. 585 This Water Well Record was completed on (mo/day/yr) 01/08/15 and the business name of Associated Environmental, Inc. By (signature) Braciley J. Johnson INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment. | | | | | | | | |
| ompleted on (mo/day/yr) 10/21/14 And this record is true to the best of my knowledge and belief. Kansas stater Well Contractor's License No. 585 This Water Well Record was completed on (mo/day/yr) 01/08/15 and the business name of Associated Environmental, Inc. By (signature) Braciley J. Johnson INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment. | | | | | | | | |
| ompleted on (mo/day/yr) 10/21/14 And this record is true to the best of my knowledge and belief. Kansas stater Well Contractor's License No. 585 This Water Well Record was completed on (mo/day/yr) 01/08/15 and the business name of Associated Environmental, Inc. By (signature) Braciley J. Johnson INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment. | | | | | | | | |
| ompleted on (mo/day/yr) 10/21/14 And this record is true to the best of my knowledge and belief. Kansas stater Well Contractor's License No. 585 This Water Well Record was completed on (mo/day/yr) 01/08/15 and the business name of Associated Environmental, Inc. By (signature) Braciley J. Johnson INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment. | | | | | 1 | | | |
| ompleted on (mo/day/yr) 10/21/14 And this record is true to the best of my knowledge and belief. Kansas stater Well Contractor's License No. 585 This Water Well Record was completed on (mo/day/yr) 01/08/15 and the business name of Associated Environmental, Inc. By (signature) Braciley J. Johnson INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment. | | | | | | | | |
| ompleted on (mo/day/yr) 10/21/14 And this record is true to the best of my knowledge and belief. Kansas stater Well Contractor's License No. 585 This Water Well Record was completed on (mo/day/yr) 01/08/15 and the business name of Associated Environmental, Inc. By (signature) Braciley J. Johnson INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment. | | OMNEDIO OFFICIO | TIONI. Thisstare :- | ll was (v) senstru | rtad (2) raca | neitricted or /3\ nli | ugged under r | ny jurisciction and u |
| rater Well Contractor's License No. 585 This Water Well Record was completed on (mc/day/yr) 07/08/15 Inder the business name of Associated Environmental, Inc. By (signature) Braciley J. Johnson INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment. By an of Water Topeka. | | OWNER'S CERTIFICA | . HON: I fils water we ! 94/4 /4 | was (x) censido | io record is t | national to the best of m | ugged dilicer li | and halief Kanson |
| nder the business name of Associated Environmental, Inc. By (signature) Braciley J. Johnson INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment. Believe on the correct answers. | | | | And th | | | | |
| INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment. Beneau of Water, Topeka, | | e No. | | | ater Well Re - | cord was complete | a on (mo/bay/ | hheen |
| INSTRUCTIONS: Please fill in planks and circle the correct allowers. Send three copies to ransas department of reality and chiminate depar | nder the business name of | ASSOCI | ated Environme | rital, IIIC. | as Danariman | y (signature) Dis | anneat Banka | Lot Water Taneka |
| | INSTRUCTIONS: Please til Kansas 66620-0001. Telent | i in bianks and circle the co lone: 913-296-5545, Sen | d one to WATER WELL | OWNER and retail | n one for your | records.` | Land Colo | Louis |