1 LOCATIO	ON OF WATER	WELL:	Fraction	Section Number	Township Number	Range Number
County:	Clay		SW1/45E 1/4NE1/4	20	7	4E
Distance	and directi		rest town or city stree			
1st and Stokes Street  water well owner: City of Green						
L) RR# St.	Address Ro	x #. BOX		Board of Agric Application N	culture, Division of N umber:	dater Resources
MARK WI AN "X"	ELL'S LOCAT IN SECTION N	ION WITH BOX:	WELL'S STATIC WAT WELL WAS USED AS:  1 Domestic 2 Irrigation 3 Feedlot 4 Industrial  Was a chemical/bact If yes, mo/day/yr s	ER LEVEL	ply 9 Dewatering Supply 10 Monitoring Only 11 Injection 12 Other	g Well Well
1 Stee 2 PVC Blank (	4 ABS	SR) 5 Wrou 6 Asbe	ught 7 Fiber estos-Cement 8 Concrin. Was casing land surface	ete Tile	(specify below)	nuch
∟ Grout ۶	Plug Interv	als: From	cement 2 Cement gro	., From <b>J.A.</b> ft. to		
2 Sewer lines 7 Pit privy 12 Watertight sewer lines 8 Sewage lagoon 13 Lateral lines 9 Feedyard 14 5 Cess Pool 10 Livestock pens 15				13 Insecticide stora 14 Abandoned water w 15 Oil well/Gas well	ge age well	cify below)
Direction from well? SOUTh WEST How many feet?						
100		_	te chips			
7 CONTRAC	TOR/S OP 1	ANDOUNED/S	ERTIFICATION:This wate	r well was nlunged in	nder my jurisdiction	and was completed
on (mo/ Water V /.a.—	/day/year)	a-12-a	under the business nam	rd is true to the bes	st of my knowledge and	belief. Kansas

INSTRUCTIONS: Use typewriter or ball point pen. <u>Please press firmly</u> and <u>print</u> clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.