ILCCATION OF WATER WELL: Fraction Ne
Distance and direction from nearest town or city street address of well if located within city? West Hwy 40, Wakeeney Ks – D & T Tire Z WATTER WELL OWNER: KDHE-BER RRW, St. Address, Box # Forbes Field, Bidg 740 Application Number: 3 MARK WELLS LOCATON WITH AN 4 DEPTH OF WELL 78.57 ft. WELL'S STATIC WATER LEVEL 65.41 ft. WELL WAS USED AS: 1 Domestic 5 Public Water Supply 9 Dewatering 10 Monitoring Well 11 Injection Well 12 Other West a chemical/bacter/ological sample submitted to Department? Yes No X. If yes, molday/yr sample was submitted to Department? Yes No X. If yes, molday/yr sample was submitted to Department? Yes No X. If yes, molday/yr sample was submitted to Department? Yes No X. If yes, molday/yr sample was submitted to Department? Yes No X. If yes, molday/yr sample was submitted to Department? Yes No X. If yes, molday/yr sample was submitted to Department? Yes No X. If yes, molday/yr sample was submitted to Department? Yes No X. If yes, molday/yr sample was submitted to Department? Yes No X. If yes, molday/yr sample was submitted to Department? Yes No X. If yes, molday/yr sample was submitted to Department? Yes No X. If yes, molday/yr sample was submitted to Department? Yes No X. If yes, molday/yr sample was submitted to Department? Yes No X. If yes, molday/yr sample was submitted to Department? Yes No X. If yes, molday/yr sample was submitted to Department? Yes No X. If yes, molday/yr sample was submitted to Department? Yes No X. If yes, molday/yr sample was submitted to Department? Yes No X. If yes, molday/yr sample was submitted to Department? Yes No X. If yes, molday/yr sample was submitted to Department? Yes No X. If yes, molday/yr sample was ubmitted to Department? Yes No X. If yes, molday/yr sample was ubmitted to Department? Yes No X. If yes, molday/yr sample was ubmitted to Department? Yes No X. If yes,
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RRM; St. Address, Box # Forbes Field, Bldg 740 Roy State, ZIP Code : Topeka, Ks 66620 Application Number: MARK WELL'S LOCATON WITH AN 4 DEPTH OF WELL 78.57 n.
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CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed
on (mo/day/yr) 8-15-05 and this record is true to the best of my knowledge and belief. Kansas
Water Well Contractor's License No. 554 This Water Well Record was completed on (mo/day/yr) 9-15-05 under the business name of Woofter Pump & Well Inc.
by (signature)
INSTRUCTIONS: Please fill in blanks and circle the correct enswers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66620-0001. Telephone: 785-296-3565.