| WATER WELL RECORD                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                             |         |            |             | Form WWC-5           |             |                                                                | Division of Water Resources; App. No. |                                         |                           |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|---------|------------|-------------|----------------------|-------------|----------------------------------------------------------------|---------------------------------------|-----------------------------------------|---------------------------|--|
| Coun                                                                                                                                                                                                                                                                                                 | ity: $\mathcal{O}$ $j$                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | F WATER WELL:                                               |         |            |             | Traction SE1/4 SE1/4 | VE 1/4      | Section N                                                      | lumber                                | Township Number                         | Range Number<br>R 540 E/W |  |
| Dista                                                                                                                                                                                                                                                                                                | nce and dir                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | rection from nearest town or city street address of well if |         |            |             |                      |             | Global Positioning Systems (decimal degrees, min. of 4 digits) |                                       |                                         |                           |  |
| located within city? 451 N. 21                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                             |         |            |             | D <sub>A</sub>       |             | Latitude                                                       |                                       |                                         |                           |  |
| 2 WATER WELL OWNER: TEREM<br>RR#, St. Address, Box # : 25 N                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                             |         |            |             | 24 = 1 30            |             | Longitud                                                       | le:                                   |                                         |                           |  |
| Z WA<br>RR#                                                                                                                                                                                                                                                                                          | St Addre                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | ss Box#                                                     | EK:     | JERC       | 10          | PACA                 |             |                                                                | n:                                    |                                         |                           |  |
| City                                                                                                                                                                                                                                                                                                 | , St. Addic<br>, State, ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Code                                                        | •       | 45/        | 10,         | XE, KO.              |             | Datum:                                                         |                                       | N. F 1                                  |                           |  |
|                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                             |         | Tesc       | OTT         | P6                   | 14 C        |                                                                |                                       | Method:                                 |                           |  |
|                                                                                                                                                                                                                                                                                                      | ATE WEI                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 1                                                           |         |            |             | ETED WELL            | •           |                                                                |                                       |                                         |                           |  |
|                                                                                                                                                                                                                                                                                                      | H AN "X"                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | X" IN Denth(s) Groundwater Encountered (1) 39 ft (2) ft (3) |         |            |             |                      |             |                                                                |                                       |                                         |                           |  |
|                                                                                                                                                                                                                                                                                                      | HAN "X" IN Depth(s) Groundwater Encountered (1) ft. (2) ft. (3) ft. (3) ft. (2) ft. (3) ft. (4) well S STATIC WATER LEVEL (1) ft. below land surface measured on mo/day/yr ft. (2) ft. (3) ft. (4) ft. (5) ft. (6) ft. (7) ft. (8) ft. (1) ft. (1) ft. (1) ft. (2) ft. (3) ft. (4) ft. (4) ft. (5) ft. (6) ft. (7) ft. (1) ft. (1) ft. (1) ft. (1) ft. (2) ft. (3) ft. (4) ft. (4) ft. (4) ft. (5) ft. (6) ft. (6) ft. (7) ft. (1) ft. (1) ft. (1) ft. (1) ft. (2) ft. (3) ft. (4) ft. (5) ft. (6) ft. |                                                             |         |            |             |                      |             |                                                                |                                       |                                         | v/vr <b>O8-26-</b> 0      |  |
| 320                                                                                                                                                                                                                                                                                                  | Pump test data: Well water was                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                             |         |            |             |                      |             |                                                                |                                       | <b>9.0</b> gpm                          |                           |  |
| Est. Yieldgpm: Well water wasft. after hours pumping                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                             |         |            |             |                      |             |                                                                |                                       | gpm                                     |                           |  |
| WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                             |         |            |             |                      |             |                                                                |                                       |                                         |                           |  |
| w                                                                                                                                                                                                                                                                                                    | E   1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                             |         |            |             |                      |             |                                                                |                                       |                                         |                           |  |
| 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                             |         |            |             |                      |             |                                                                |                                       |                                         | •••••                     |  |
| SW SE    W                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                             |         |            |             |                      |             |                                                                |                                       |                                         | TC /1 /                   |  |
|                                                                                                                                                                                                                                                                                                      | was a chemical/bacteriological sample submitted to Department? Yes No; If yes, mo/day/yrs                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                             |         |            |             |                      |             |                                                                |                                       |                                         |                           |  |
| Sample was submitted                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                             |         |            |             |                      |             |                                                                |                                       |                                         |                           |  |
|                                                                                                                                                                                                                                                                                                      | S                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                             |         |            |             |                      |             |                                                                |                                       |                                         |                           |  |
|                                                                                                                                                                                                                                                                                                      | E OF CAS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                             | ED:     | 5 Wro      | ught Iroi   | n 8 Con              | crete tile  |                                                                | CASING                                | G JOINTS: Glued,                        |                           |  |
|                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 3 RMP (                                                     | SR)     | 6 Asbe     | estos-Ce    | ment 9 Oth           | er (specify | below)                                                         |                                       | Welded.                                 |                           |  |
| 2 PVC 4 ABS 7 Fiberglass Threaded                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                             |         |            |             |                      |             |                                                                |                                       |                                         |                           |  |
| Blank casing diameter                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                             |         |            |             |                      |             |                                                                |                                       |                                         |                           |  |
| Casing height above land surface                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                             |         |            |             |                      |             |                                                                |                                       |                                         |                           |  |
| 1 Steel 3 Stainless Steel 5 Fiberglass <u>7 PVC</u> 9 ABS 11 Other (Specify)                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                             |         |            |             |                      |             |                                                                |                                       |                                         |                           |  |
| 2 Brass 4 Galvanized Steal 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, 535 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                             |         |            |             |                      |             |                                                                |                                       |                                         |                           |  |
| 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw cut 10 Other (specify)  SCREEN-PERFORATED INTERVALS: From                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                             |         |            |             |                      |             |                                                                |                                       |                                         |                           |  |
| SCREEN-PERFORATED INTERVALS: From                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                             |         |            |             |                      |             |                                                                |                                       |                                         |                           |  |
| From                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                             |         |            |             |                      |             |                                                                |                                       |                                         |                           |  |
| GRAVEL PACK INTERVALS: From                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                             |         |            |             |                      |             |                                                                |                                       |                                         |                           |  |
|                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                             |         | F          | rom         | ft. to               |             | ft.,                                                           | From                                  | ft. to .                                | ft.                       |  |
| 6 GRO                                                                                                                                                                                                                                                                                                | UT MATE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | DIAI ·                                                      | 1 Ne    | at cement  | 2 Cei       | ment grout 3 R       | entonite    | 4 Other                                                        |                                       | • • • • • • • • • • • • • • • • • • • • |                           |  |
| Grout In                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | From                                                        |         | of to      | , <i>"A</i> | ft From              | 40          | ft to                                                          | <b>(</b> )                            | t From                                  | ft. toft.                 |  |
|                                                                                                                                                                                                                                                                                                      | the nearest                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                             |         |            |             |                      |             | . 10. 00                                                       |                                       | .,                                      | 10. 10                    |  |
| l                                                                                                                                                                                                                                                                                                    | Septic tank                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                             |         | Lateral li |             |                      | 10 Livest   | tock pens                                                      | 13 Ins                                | secticide storage                       | 16 Other (specify         |  |
|                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                             |         |            |             |                      |             |                                                                | below)                                |                                         |                           |  |
| 3                                                                                                                                                                                                                                                                                                    | Watertight<br>n from wel                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | sewer lin                                                   |         |            |             | Feedyard             | 12 Fertili  | zer storage                                                    | 15 Oi                                 | l well/gas well                         | ······                    |  |
| Directio                                                                                                                                                                                                                                                                                             | n from wel                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 1?                                                          | ND      | eth.       |             |                      | How mar     | ny feet?(                                                      | ovce                                  | Z IÖD'                                  |                           |  |
| FROM                                                                                                                                                                                                                                                                                                 | TO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                             |         | LITHOLO    | OGIC LO     |                      | FROM        | 1 TO                                                           |                                       | PLUGGING INT                            | ERVALS                    |  |
| D<br>3<br>29                                                                                                                                                                                                                                                                                         | 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | TOP                                                         |         |            | ROW         |                      |             |                                                                |                                       |                                         |                           |  |
| ي _                                                                                                                                                                                                                                                                                                  | 29                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | CLY                                                         | ay 7    | TAN G      | SILT        |                      |             |                                                                |                                       |                                         |                           |  |
| 29                                                                                                                                                                                                                                                                                                   | ٧٦                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <u>CL</u>                                                   | 7y L    | LIGHT      |             | AY                   |             |                                                                |                                       |                                         | , win-14                  |  |
| 32                                                                                                                                                                                                                                                                                                   | 70                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | CLA                                                         | YW      | ITH L      |             | PAWOUST              | DOE         |                                                                |                                       |                                         |                           |  |
|                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | LIGH                                                        |         |            |             | LAY                  |             |                                                                |                                       |                                         |                           |  |
|                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | SAN                                                         | 057     | DWIL.      | LIGH        | IT GRAY P            | LTY         |                                                                |                                       |                                         |                           |  |
| 70                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | SHA                                                         | 71 E    | . GR A     | 4           |                      |             |                                                                |                                       | .,                                      |                           |  |
|                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                             |         |            |             |                      |             |                                                                | -                                     |                                         |                           |  |
|                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                             |         |            |             |                      |             |                                                                |                                       |                                         |                           |  |
|                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                             |         |            |             |                      | <u> </u>    |                                                                | <u></u>                               | 1 (2)                                   |                           |  |
| 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) 2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                             |         |            |             |                      |             |                                                                |                                       |                                         |                           |  |
| under m                                                                                                                                                                                                                                                                                              | y jurisdicti                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | on and w                                                    | as com  | pleted on  | (mo/day     | y/year) LO           | . /         | d this recor                                                   | d is true                             | to the best of my kno                   | wledge and belief.        |  |
| Kansas '                                                                                                                                                                                                                                                                                             | Water Well                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Contrac                                                     | tor's L | icense No  | $\sim 0.0$  | This Wate            | r Well Re   | cord was c                                                     | ompleted                              | l on (mo/day/ye)r)                      | 7-27-09                   |  |
| under th                                                                                                                                                                                                                                                                                             | e business                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | name of                                                     | TLS"    | ING        | DIEASE      | PUMP SE              | DDINIT -1   | y (signatu                                                     | re V                                  | suf Kyest                               | correct answers. Send top |  |
|                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                             |         |            |             |                      |             |                                                                |                                       |                                         |                           |  |
| three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                             |         |            |             |                      |             |                                                                |                                       |                                         |                           |  |
| 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell/index.html.                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                             |         |            |             |                      |             |                                                                |                                       |                                         |                           |  |