

Board of Agriculture, Division of Water Resources
Application Number: _____

Submitted _____ 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____
Welded _____

OFFICE USE ONLY

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CORRECTED

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (x) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and w
Completed on (mo/day/yr) 12/8/2009 And this record is true to the best of my knowledge and belief. Kansas
Water Well Contractor's License No. 585 This Water Well Record was completed on (mo/day/yr) 1/6/2010
under the business name of Associated Environmental, Inc. By (signature) Bradley J Johnson
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka,
WATERWELL OWNER and retain one for your records.

INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health, Kansas 66620-0001. Telephone: 913-296-5545. Send one to **WATER WELL OWNER** and retain one for your records.