Distance and direction from nearest lown or city stylest address of well if located within city? WATER WELL OWNER:		WATER WELL RECORD	Form WWC-5	KSA 82a-	1212	
Distanços and direction figm nearest jown or city striffet address of well if located within city? WATER WELL OWNER: WATER WELL OWNER: DOWN State, 21 Code LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: DEPTH OF COMPLETED WELL. WELL'S STATIC WATER LEVEL. DEPTH OF COMPLETED WELL. Now - Now	LOCATION OF WATER WELL:	Fraction		/ ')	1 17 17	T (7)
WATER WELL OWNER: RR#, St. Address, Box # City, State, ZIP Code LOCATE WELLS LOCATION WITH AN "X" IN SECTION BOX. Depth(s) Groundwater Encountered 1.				10		I B 2 EW
WATER WELL OWNER: And Address, Box # Board of Agriculture, Division of Water Resource Cocart Well S LOCATION WITH DEPTH OF COMPLETED WELL						
Board of Agriculture, Division of Water Resour Application Number: Control Contro						
Application Number: Application Number: Application Number:		New York			Board of Agriculture	Division of Water Resource
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Est. Yield O gen; Well water was the difference of the control of						
Bore Hole Diameter	NW NE E	<i>-</i> 1 .	_			
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2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes. 10 Was a chemical/bacteriological sample submitted to Department? Yes. 15 Wes, mo/day/yr sample was semitted Water Well Disinfected? No Welded No No Welded No Welded No Welded No Welded No Welded No No No No No No No N	- ' i i	\sim 1				•
Was a chemical/bacteriological sample submitted to Department? Yes	SW SE					
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Blank casing diameter in to ft., Dia in to ft., Dia in to Casing height above land surface. in, weight in, wei	Ø PVC 4 ABS	7 Fiberglass			•	aded
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CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and w		- 30 - 76	was (1) constru			
completed on (mo/day/year) and this record is true to the best of my knowledge and belief. Kans	•	44)			. .	nowledge and belief. Kansa:
Water Well Contractor's License Mo	/ 1. (17 hand on				<u> </u>
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department						\sim