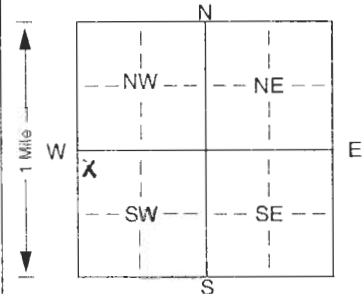


8707 S.E. Burns Ave Belmont

RR#, St. Address, Box # : 8707 SE Burn Ave  
City, State, ZIP Code : Kingman MS 37618

Board of Agriculture, Division of Water Resources  
Application Number:

AN "X" IN SECTION BOX:



Was a chemical/bacteriological sample submitted to Department? Yes. . . . . No. . . . . ; If yes, mo/day/yr sample was submitted  
Water Well Disinfected? Yes No

Casing height above land surface. 2.4" In. weight 5.08 lbs./ft. Wall thickness or gauge No. 2.1

10 Other (specify) ..... ft

From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.

Grout Intervals: From 4 ft to 30 ft From \_\_\_\_\_ ft to \_\_\_\_\_ ft From \_\_\_\_\_ ft to \_\_\_\_\_ ft

.....

How many feet? 100

[illegible]

under the business name of Cherry Tree by (signature) \_\_\_\_\_

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 of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone 785-296-5524. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.