APATOET INV SW v. SE v. T35 S R 10 V EA IN 1 S A TO THE CONTROLL OF STREET AND THE CONTROLL OF STREE	LOCATION OF WATER		TER WELL RECORD	Sec	tion Number	Township N	lumber	Bange	Number
I mail E. J. North east edge of Kiewa VATER WELL OWNER JORTY MC Namer State, 2P Code Depthis Groundwater Encountered 1 WELLS STATIO WATER LEVEL 1 Beythis Groundwater Encountered 1 WELLS STATIO WATER LEVEL 1 Beythis Groundwater Encountered 1 WELLS STATIO WATER LEVEL 1 Beythis Groundwater Encountered 1 WELL STATIO WATER LEVEL 1 Beythis Groundwater Encountered 1 WELL WATER TO BE USED AS 5 Public water supply 8 A conditioning 11 injection well 1 Bore Holds Diameter 9 Well Water Was 1 Bore Holds Diameter 9 Well WATER TO BE USED AS 5 Public water supply 8 Devatering 11 injection well 1 Bore Holds Diameter 9 Well WATER TO BE USED AS 5 Public water supply 9 Devatering 11 injection well 1 Bore Holds Diameter 9 Well WATER TO BE USED AS 5 Public water supply 9 Devatering 11 injection well 1 Bore Holds Diameter 9 Well WATER TO BE USED AS 5 Public water supply 9 Devatering 11 injection well 1 Bore Holds Diameter 9 Well WATER TO BE USED AS 5 Public water supply 9 Devatering 11 injection well 1 Bore 1 State 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Water Well Diameter 1 Was a chemical bacteriological sample submitted to Department? Yes. Water Well Demindered? Yes, water Well State 1 Bore State To Perplass 7 Fiberglass 7 Fiberglass 7 Fiberglass 8 Fiberglass 8 Fiberglass 8 Fiberglass 8 Fiberglass 9 Canner Well Water Well Record Water Well Company No. 210 EEO FSCREER OF DEFRORATION MATERIAL: 1 State 1 State 3 States Well States 8 States 9 Fiberglass 1 Fiberglass 9 Fiberglass 1 Fiberglass 1 Fiberglass 1 Fiberglass 1 Fiberglass		•	14 SW 14 SE	ı	6				
WATER MELL OWNER JORTY MC Namer State, 2P Code Stat	stance and direction from	nearest town or city stree	t address of well if located	within city?					
SI Address, Box # HE 1 bexy24x Kiewa, KS, 67976 Board of Agriculture, Division of Water Reso. Application Number Application N	1 mile	E, & North es	st edge of Ki	.ewa					
SI Address, Box # HE 1 bexy24x Kiewa, KS, 67976 Board of Agriculture, Division of Water Reso. Application Number Application N	WATER WELL OWNER	Jerry Mc Nam	ar						
DOATE WELL'S LOCATION WITH JOSEPH OF COMPLETED WELL. 32 ft. SLEVATION. N.Y. IN SECTION BOX: WELL'S STATIC WATER LEVEL. 10 ft. below land surface measured on moidayyyr. 10-20-97. WELL'S STATIC WATER LEVEL. 10 ft. below land surface measured on moidayyr. 10-20-97. WELL'S STATIC WATER LEVEL. 10 ft. below land surface measured on moidayyr. 10-20-97. WELL'S STATIC WATER LEVEL. 10 ft. below land surface measured on moidayyr. 10-20-97. But Hold 10 gpm: Well water supply 8 Ar conditioning 11 injection well 10 pmm. Well water supply 9 Dewatering 12 Other (Specify below) 2 injection will 10 pmm. Well water supply 9 Dewatering 12 Other (Specify below) 2 injection will 10 pmm. Well water supply 9 Dewatering 12 Other (Specify below) 2 injection will 10 pmm. Well water supply 9 Dewatering 12 Other (Specify below) 2 injection will 10 pmm. Well water supply 9 Dewatering 12 Other (Specify below) 1 injection well 10 pmm. Well water supply 9 Dewatering 12 Other (Specify below) 1 injection well 10 pmm. Well water supply 9 Dewatering 12 Other (Specify below) 1 injection well 10 pmm. Well water supply 9 Dewatering 12 Other (Specify below) 1 injection well 10 pmm. Well water 11 None (ppm hole) 1 pmm. Well water 10 pmm. Well water 10 pmm. Well water 10 pmm. Well water 11 None (ppm hole) 1 pmm. Well water 10 pmm. Well wat	#, St. Address, Box #	He 1 bex92A	Kiewa, KS. 67	•7•		Board of	Agriculture, D	ivision of Wa	iter Resour
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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	der the business name of						$m \vee p$	AV	
of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.	INSTRUCTIONS: Use typewrite	er or ball point pen. <u>PLEASE PRES</u>	S FIRMLY and PRINT clearly. Plea	ise fill in blanks, 45. Send one to	underline or circle WATER WELL ON	the correct answers.	Send top three of for your records	ortes to Kansas	Department