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NATER WELL OWNER DIAGNET TO END STANDARD PROCESS TO Application Number: State, 2P Code Nor FORKS STANDARD PROCESS ASSETS AND SCATE WELLS COATON WITH DEPTH OF COMPLETED WELL Z. 4/2. In. ELEVATION. N.X. IN SECTION BOX: Depth of COMPLETED WELL Z. 4/2. In. ELEVATION. N.X. IN SECTION BOX: Depth of COMPLETED WELL Z. 4/2. In. ELEVATION. N.X. IN SECTION BOX: WELL'S STATIC WATER LEVEL J. 3/2. It. below land aurisose measured on modeyry. Pump lead data: Well water was in. if. after nours pumping. gi Bore Hole Dearwater. J. in. to 2/2 of the depth of the pumping of the pum	ance and direction from nearest town	or city street ac	Idress of well if located	within city?		1 1 3		7 FW
Stand, ZIP Code Not TORK'S DIAS Stand, ZIP Code Application Number: Application	WATER WELL OWNER. DUGE	e Mc E.	100 p	Min JY	S mi.	West		
State, ZP Code	St Address Box # : 1008	Home	201			Board of Agricults	ura. Division of Wr	tor Bosoure
Depth(s) Groundwater Encountered 1 t. 2 t. 3. t. below land surface measured on moldayly Pump test data. Well water was t. t. after hours pumping. 9 test yeld grow was t. t. after hours pumping. 9 test yeld grow was t. t. after hours pumping. 9 test yeld grow was t. t. after hours pumping. 9 test yeld grow was t. t. after hours pumping. 9 test yeld grow was t. t. after hours pumping. 9 test yeld grow was t. t. after hours pumping. 9 test yeld grow was t. t. after hours pumping. 9 test yeld grow was t. t. after hours pumping. 9 test yeld grow was t. t. after hours pumping. 9 test yeld grow was t. t. after hours pumping. 9 test yeld yeld yeld yeld yeld yeld yeld yeld	State, ZIP Code : Nort	57654			Application Number:			
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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		_					•	
Water Well Disinfected? Yes No PyPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) 2 PVC 4 ASS 7 Fiberglass 7 Fiberglass 1 Threaded. 4 ASS 1, Dia in. to it., Dia in. to mg height above land surface. 1/2 in., weight 15 Siel 3 Statistics steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) 1 Steel 3 Statistics steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) 1 Steel 3 Statistics steel 6 Concrete tile 9 ABS 12 None used (open hole) 12 Continuous slot 3 Mill slot 6 Wire wrapped 8 Saw cut 11 None (open hole) 12 Continuous slot 3 Mill slot 6 Wire wrapped 9 Diffied holes 1 Continuous slot 3 Mill slot 6 Wire wrapped 10 Other (specify) 12 Convered shutter 4 Key punched 17 Torch cut 19 Diffied holes 1 Continuous slot 3 Mill slot 6 Wire wrapped 10 Other (specify) 1 Continuous slot 3 Mill slot 6 Wire wrapped 10 Other (specify) 1 Continuous slot 3 Mill slot 6 Wire wrapped 10 Other (specify) 1 Continuous slot 7 Septic tall 11 None (open hole) 1 Continuous slot 7 Septic tall 11 None (open hole) 1 Continuous slot 8 Saw cut 11 None (open hole) 1 Continuous slot 7 Septic tall 11 None (open hole) 1 Continuous slot 8 Septic tall 11 None (open hole) 1 Continuous slot 7 Septic tall 11 None (open hole) 1 Continuous slot 8 Septic tall 11 None (open hole) 1 Continuous slot 8 Septic tall 11 None (open hole) 1 Continuous slot 10 Septic tall 11 None (open hole) 1 Continuous slot 10 Septic tall 11 None (open hole) 1 Continuous slot 10 Septic tall 11 None (open hole) 1 Continuous slot 10 Septic tall 11 None (open hole) 1 Continuous slot 11 Non	SW SE	•	4 Industrial 7	Lawn and g	arden only	10 Monitoring well		
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A TITLE TO THE STATE OF THE STA	er Well Contractor's License No	4.28	This Water We	Il Record was	s completed	n (mo/day/yr) 6-1.5	794	
or the business name of STALDER DRILLING by (signature) by talder						7 - 19UK		

INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks, underline or circle the corect answers Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNED and retain one for your records.