LOCATION OF WATER WELL  PRINCIPLE OF THE PRINCIPLE STATE OF THE PRIN	PLUGGING REST WATER WELL RECORD FORM WWC	-5 KSA 82a-1212
Sent Property of the Property	LOCATION OF WATER WELL: Fraction C 18 C Se	ection Number Township Number Range Number
## Since JP Code  WATER WELL CONNER:  WATER WELL CONNER:  RP. SI. Address 800 # 1	ounty: 777 ITEHELL WE 1/4 SW 1/4 NE 1/4	
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Re. St. Address. Box # : 13 o k 7   Board of Agriculture. Division of Water Resour. Application Number: CAA KACCAA    JOCATE WELLS, DOCATION WITH    JOCATE WELLS, DOCATION WITH    JOCATE WELLS, DOCATION WITH    JOCATE WELLS, STATIC WATER LEVEL   In below land surface measured on modelary    WELLS STATIC WATER LEVEL   In below land surface measured on modelary    WELLS STATIC WATER LEVEL   In below land surface measured on modelary    WELLS STATIC WATER LEVEL   In below land surface measured on modelary    WELL STATIC WATER LEVEL   In below land surface measured on modelary    WELL WATER WELLS STATIC WATER LEVEL   In below land surface measured on modelary    WELL WATER WELLS STATIC WATER LEVEL   In below land surface measured on modelary    WELL WATER WELLS STATIC WATER LEVEL   In below land surface measured on modelary    WELL WATER WELLS WELL WATER LEVEL   In below land surface measured on modelary    WELL WATER WELLS STATIC WATER LEVEL   In below land surface measured on modelary    WELL WATER WELLS STATIC WATER LEVEL   In below land surface measured on modelary    Type of BLANK CASING USED   In to land surface measured on modelary    Joseph Hall Well Well Well Well Well Well Well W		
N. Saile, J. 20 Code  N. Saile, J. 20 Code J. J. 20 Code J. 3 Code		Board of Agriculture, Division of Water Resource
LOCATE WELLS LOCATION WITH AN "X" IN SECTION 9CX.    Depths) Gourdanter Ecocuriented 1.		
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WELL WATER SEED AS \$   Public water supply   8 Air conditioning 11 Injection well   1 Dimestic 3 Feedot   6 ON field water supply   9 Devatering   12 Other (Specify below)   12 Other (Specify below)   12 Other (Specify below)   13 Mile   15 Other (Specify below)   14 Other (Specify below)   15 Other (Specify Specify below)   15 Other (Specify Specify Below)   15 Other (	Pump test data: Well water was	ft. after hours pumping gp
1 Domestic   3 Feedlot   6 Oll field water supply   2 Dewatering   12 Other (Specify below)	W	
2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well Was a chemical bacteriological sample submitted to Department? Yes		
Was a chemical/bacteriological sample submitted to Department? Yes. No. If yes, modayry sample was a mitted mitted will will build be will b	I SW I St I !	
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NSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct apowers. Send top three opies to Kansas Department of Health and Environment, Bureau of Water Protection, Topeka, Kansas 66620-7320, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your	npleted on (mo/day/year)	and this record is true to the best of my knowledge, and belief. Kansavas completed on (mo/day/yr)

records