

USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

Permit No 79-124

CWW 16138

Bozarth A-#1

1. Location of well:		County Seward	Fraction 1/4 C-SE 1/4 NW 1/4	Section number 11	Township number T 34 S R 33 E/W	Range number
2. Distance and direction from nearest town or city: From Liberal go 3 mi North 2 mi east 1 1/2 mi north			3. Owner of well Anadarko Production			
Street address of well location if in city: back east to location			R.R. or street: c/o P. Gatlin Box 351			
			City, state, zip code: Liberal, Kansas 67901			
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 9 in. Completion date _____ Well depth 260 ft. 8-13-79		
				7. <input type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary		
5. Type and color of material		From	To	8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> Lawn <input checked="" type="checkbox"/> Oil field water <input type="checkbox"/> Other		
Surface		0	2	9. Casing: Material _____ Height: Above or below Threaded _____ Welded _____ Surface 28 in. RMP _____ PVC <input checked="" type="checkbox"/> Weight 2.78 lbs./ft. Dia. 5 in. to 200 depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 56		
Fine sand		2	46	10. Screen: Manufacturer's name _____ Type Sawed Dia. 5" Slot/gauze _____ Length 60' Set between 200 ft. and 260 ft. _____ ft. and _____ ft.		
Clay		46	138	Gravel pack? Yes Size range of material 1/8-3/16		
Medium to large sand		138	185	11. Static water level: 198 ft. below land surface Date 8-13-79 mo./day/yr.		
Fine sand		185	257	12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 60 g.p.m.		
Clay		257	260	13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
				14. Well head completion: <input type="checkbox"/> Pitless adapter 28 inches above grade		
				15. Well grouted? Yes With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 10 ft.		
				16. Nearest source of possible contamination: ft. 100 Direction N.E. Type Oil well Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
				17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.p.m. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other		
				(Use a second sheet if needed)		
18. Elevation:		19. Remarks:		20. Water well contractor's certification: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.		
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley				Business name _____ License No. 118 Address Carlile Water Well Service Signed Edward E. Means Date 8-20-79 Authorized representative		

T 34 S R 33 E/W
 Sec 11
 1/4 1/4 1/4

Forward the white, blue and pink copies to the Department of Health and Environment

Form WWC-5