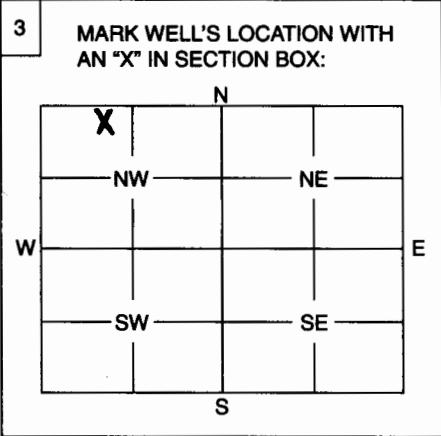


1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range	Number
County: <u>Seward</u>	<u>1/4 NE 1/4 NW 1/4 NW</u>	<u>14</u>	<u>35S</u>	<u>34W</u>	<u>EW</u>

Distance and direction from nearest town or city street address of well if located within city?
Liberal: Hwy 54 and Western , 2 West on Hwy 54 and South into ..

2 WATER WELL OWNER: **Bill Booth**
 RR #, St. Address, Box #: **Rt. 1 Box 66**
 City, State, ZIP Code : **Liberal, Ks. 67901**

Board of Agriculture, Division of Water Resources
 Application Number: _____



4 DEPTH OF WELL240..... ft.
 WELL'S STATIC WATER LEVEL140.... ft.

WELL WAS USED AS:

<input checked="" type="radio"/> 1 Domestic	5 Public Water Supply	9 Dewatering
2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well
3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well
4 Industrial	8 Air Conditioning	12 Other

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

Water Well Disinfected: Yes....... No

5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (Specify below)
<input checked="" type="radio"/> 2 PVC	4 ABS	6 Asbestos-Cement	8 Concrete Tile

Blank casing diameter6... in. Was casing pulled? Yes No........ If yes, how much

Casing height above or below land surface7.2..... in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other

Grout Plug Intervals: From ft. to ft., From ft. to ft., From to ft.

What is the nearest source of possible contamination:

1 Septic tank	6 Seepage pit	11 Fuel storage	16 Other (specify below)
2 Sewer lines	7 Pit privy	12 Fertilizer storage
3 Watertight sewer lines	8 Sewage lagoon	13 Insecticide storage	
4 Lateral lines	9 Feedyard	14 Abandoned water well	
5 Cess pool	10 Livestock pens	15 Oil well/Gas well	

Direction from well? How many feet?

FROM	TO	PLUGGING MATERIALS
240	150	Chlorinate Gravel
150	130	Hole Plug
130	6	Cement Grout
6	Surface	Backfill

7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)08-01-08..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No.KWCL 430..... This Water Well Record was completed on (mo/day/year) under the business name ofHoward Drilling Box 806 Beaver Ok 73932..... by (signature) Howard

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, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.