

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

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:	<u>Bill Booth</u>	Board of Agriculture, Division of Water Resources
RR #, St. Address, Box #:	<u>Rt. 1 Box 66</u>	Application Number:
City, State, ZIP Code :	<u>Liberal, Ks. 67901</u>	

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL <u>240</u> ft.
	WELL'S STATIC WATER LEVEL <u>140</u> ft.
	WELL WAS USED AS: <input checked="" type="checkbox"/> 1 Domestic 5 Public Water Supply 9 Dewatering <input type="checkbox"/> 2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well <input type="checkbox"/> 3 Feedlot 7 Domestic (Lawn & Garden) 11 Injection Well <input type="checkbox"/> 4 Industrial 8 Air Conditioning 12 Other
Was a chemical / bacteriological sample submitted to Department? Yes No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted	
Water Well Disinfected: Yes <input checked="" type="checkbox"/> No	

5 TYPE OF BLANK CASING USED:	<input type="checkbox"/> 1 Steel <input type="checkbox"/> 3 RMP (SR) <input type="checkbox"/> 5 Wrought <input type="checkbox"/> 7 Fiberglass <input type="checkbox"/> 9 Other (Specify below)		
	<input checked="" type="checkbox"/> 2 PVC <input type="checkbox"/> 4 ABS <input type="checkbox"/> 6 Asbestos-Cement <input type="checkbox"/> 8 Concrete Tile		
Blank casing diameter <u>5</u> ... in. Was casing pulled? Yes No <input checked="" type="checkbox"/> If yes, how much			
Casing height above or below land surface <u>72</u> in.			

6 GROUT PLUG MATERIAL:	<input type="checkbox"/> 1 Neat cement	<input type="checkbox"/> 2 Cement grout	<input type="checkbox"/> 3 Bentonite	<input type="checkbox"/> 4 Other
GROUT PLUG INTERVALS:	From ft. to ft.,	From ft. to ft.,	From ft. to ft.,	From to ft.
What is the nearest source of possible contamination:				
<input type="checkbox"/> 1 Septic tank <input type="checkbox"/> 6 Seepage pit <input type="checkbox"/> 11 Fuel storage <input type="checkbox"/> 16 Other (specify below)				
<input type="checkbox"/> 2 Sewer lines <input type="checkbox"/> 7 Pit privy <input type="checkbox"/> 12 Fertilizer storage				
<input type="checkbox"/> 3 Watertight sewer lines <input type="checkbox"/> 8 Sewage lagoon <input type="checkbox"/> 13 Insecticide storage				
<input type="checkbox"/> 4 Lateral lines <input type="checkbox"/> 9 Feedyard <input type="checkbox"/> 14 Abandoned water well				
<input type="checkbox"/> 5 Cess pool <input type="checkbox"/> 10 Livestock pens <input type="checkbox"/> 15 Oil well/Gas well				
Direction from well? How many feet?				

FROM	TO	PLUGGING MATERIALS
<u>240</u>	<u>150</u>	<u>Chlorinated Gravel</u>
<u>150</u>	<u>130</u>	<u>Hole Plug</u>
<u>130</u>	<u>6</u>	<u>Cement Grout</u>
<u>6</u>	<u>Surface</u>	<u>Backfill</u>

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