

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number									
County: <b>Haskell</b>		<b>NW 1/4 NW 1/4 NE 1/4</b>	<b>21</b>	<b>T 28 S</b>	<b>R 34 E/W</b>									
Distance and direction from nearest town or city street address of well if located within city? <b>From Sublette go 6mi North 9mi West 3 mi North 1/2 mi West 1/4 South to location.</b>														
2 WATER WELL OWNER: <b>Wayne Lucas Mobil Oil Corp.</b>														
RR#, St. Address, Box # : City, State, ZIP Code : <b>Satanta, Kansas</b>														
Board of Agriculture, Division of Water Resources Application Number: <b>T 85-763</b>														
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <b>560</b> ft. ELEVATION: .....												
<div style="text-align: center;">N 1 Mile W E S</div> <table border="1" style="margin: auto; text-align: center;"><tr><td> </td><td>X</td><td> </td></tr><tr><td>NW</td><td>NE</td><td> </td></tr><tr><td>SW</td><td>SE</td><td> </td></tr></table>			X		NW	NE		SW	SE		Depth(s) Groundwater Encountered 1. <b>202</b> ft. 2. .... ft. 3. .... ft.			
			X											
		NW	NE											
		SW	SE											
		WELL'S STATIC WATER LEVEL <b>358</b> ft. below land surface measured on mo/day/yr <b>8/28/85</b>												
Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm														
Est. Yield ..... gpm: Well water was ..... ft. after ..... hours pumping ..... gpm														
Bore Hole Diameter <b>11</b> in. to <b>560</b> ft., and ..... in. to ..... ft.														
WELL WATER TO BE USED AS:														
5 Public water supply 8 Air conditioning 11 Injection well														
1 Domestic 3 Feedlot <u>6 Oil field water supply</u> 9 Dewatering 12 Other (Specify below)														
2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well														
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 iron 8 Concrete tile CASING JOINTS: <u>Glued</u> .....Clamped.....														
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded.....														
7 Fiberglass.....Threaded.....														
Blank casing diameter <b>6 5/8</b> in. to <b>420</b> ft., Dia.....in. to .....ft., Dia.....in. to .....ft.														
Casing height above land surface <b>28</b> in., weight <b>2.85</b> lbs./ft. Wall thickness or gauge No. <b>265</b>														
TYPE OF SCREEN OR PERFORATION MATERIAL:														
1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement														
2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify).....														
12 None used (open hole)														
SCREEN OR PERFORATION OPENINGS ARE:														
1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole)														
2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes														
7 Torch cut 10 Other (specify).....														
SCREEN-PERFORATED INTERVALS: From <b>340</b> ft. to <b>400</b> ft., From <b>500</b> ft. to <b>560</b> ft.														
From <b>440</b> ft. to <b>460</b> ft., From .....ft. to .....ft.														
GRAVEL PACK INTERVALS: From <b>380</b> ft. to <b>560</b> ft., From .....ft. to .....ft.														
From .....ft. to .....ft., From .....ft. to .....ft.														
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other .....														
Grout Intervals: From <b>0</b> ft. to <b>10</b> ft., From .....ft. to .....ft., From .....ft. to .....ft.														
What is the nearest source of possible contamination:														
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well														
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well														
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)														
13 Insecticide storage .....														
Direction from well? <b>Southeast of water well</b> How many feet? <b>220'</b>														
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG									
0	2	surface	543	560	blue clay									
2	46	clay												
46	167	med. to large sand												
167	238	clay												
238	272	20% clay & 80% med. to large sand												
272	293	clay												
293	344	med. to large sand												
344	350	clay												
350	387	40% fine sand & 60% med. to large sand												
387	443	clay												
443	461	50% clay & 50% fine sand												
461	498	white clay												
498	543	med. to large sand												
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) .. <b>August 28, 1985</b> ..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. .... <b>118</b> ..... This Water Well Record was completed on (mo/day/yr) <b>September 5, 1985</b> ..... under the business name of <b>Carlile Water Well Service, Inc.</b> by (signature) <i>[Signature]</i>														
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 correct answers. Send top three copies to Kansas Department of Health and Environment, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.														