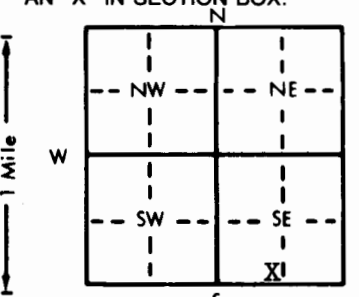


1 LOCATION OF WATER WELL: County: Grant	Fraction SE 1/4 SW 1/4 SE 1/4	Section Number 32	Township Number T 28 S	Range Number R 38 E/W
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Distance and direction from nearest town or city street address of well if located within city?
7 miles West, 1 mile South of Ulysses, Kansas

2 WATER WELL OWNER: **Amoco Production Company**
 RR#, St. Address, Box #: **P. O. Box 432**
 City, State, ZIP Code: **Liberal, Kansas 67901**
 Board of Agriculture, Division of Water Resources
 Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:


4 DEPTH OF COMPLETED WELL: **525** ft. ELEVATION:
 Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL **236** ft. below land surface measured on mo/day/yr **1/5/82**
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield **50** gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter **10** in. to _____ 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 6 Oil field water supply 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 **X** _____; If yes, mo/day/yr sample was sub-
 mitted Water Well Disinfected? Yes **X** No

5 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued **X** Clamped _____
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____
 7 Fiberglass Threaded _____
 Blank casing diameter **5** in. to **465** ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface **12** in., weight _____ lbs./ft. Wall thickness or gauge No. **Sch. 40**
 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) _____
 9 ABS 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 **465** ft. to **525** ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From **16** ft. to **525** 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 **6** ft. to **16** 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 **Unknown**

Direction from well?			How many feet?		
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	19	Clay	486	494	Clay
19	25	Fine sand	494	506	Sandstone
25	52	Sandy clay	506	520	Sandstone & clay
52	121	Clay	520	546	Shale; redbed
121	174	Fine to medium sand	546	560	Redbed and shale
174	310	Clay, streaks of sand			
310	357	Medium sand			
357	382	Clay			
382	402	Sand			
402	424	Coarse sand			
424	436	Yellow clay			
436	456	Blue clay			
456	460	Shale			
460	470	Streaks of blk. shale			
470	486	Sandstone			

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) **February 5, 1982** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **102** This Water Well Record was completed on (mo/day/yr) **March 23, 1982** under the business name of **Layne-Western Company, Inc.** by (signature) *[Signature]*

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, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

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32
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