

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: HASKELL		NE ¼ NE ¼ SW ¼	33	T 29 S	R 33W E/W
Distance and direction from nearest town or city street address of well if located within city? FROM SUBLETTE 3 MILES WEST, ½ NORTH WEST INTO LOC.					
2 WATER WELL OWNER: HARRIS OIL & GAS				# 1-33 PREEDY	
RR#, St. Address, Box # : P.O. BOX 976				Board of Agriculture, Division of Water Resources	
City, State, ZIP Code : LIBERAL, KS 67905				Application Number: 940317	
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: 440 ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. .ft. 2. .ft. 3. .ft.			
		WELL'S STATIC WATER LEVEL 350 ft. below land surface measured on mo/day/yr 3-17-95			
		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 .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 WAS 3 Feedlot <input checked="" type="radio"/> Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring 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:					
<input checked="" type="radio"/> Steel 3 RMP (SR) <input checked="" type="radio"/> PVC 4 ABS		5 Wrought iron 8 Concrete tile 6 Asbestos-Cement 9 Other (specify below)		CASING JOINTS: Glued Clamped Welded Threaded	
Blank casing diameter 6 in. to 460 ft., Dia		Casing height above land surface 5' BELOW in., weight lbs./ft. Wall thickness or gauge No.			
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel 3 Stainless steel 5 Fiberglass 2 Brass 4 Galvanized steel 6 Concrete tile		7 PVC 10 Asbestos-cement 8 RMP (SR) 11 Other (specify) 9 ABS 12 None used (open hole)			
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot 3 Mill slot 2 Louvered shutter 4 Key punched		5 Gauzed wrapped 8 Saw cut 6 Wire wrapped 9 Drilled holes 7 Torch cut 10 Other (specify)		11 None (open hole)	
SCREEN-PERFORATED INTERVALS: From .ft. to .ft., From .ft. to .ft., From .ft. to .ft.					
GRAVEL PACK INTERVALS: From .ft. to .ft., From .ft. to .ft., From .ft. to .ft.					
6 GROUT MATERIAL: 1 Neat cement <input checked="" type="radio"/> Cement grout 3 Bentonite 4 Other					
Grout Intervals: From 8 ft. to 5 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 2 Sewer lines 5 Cess pool 8 Sewage lagoon 3 Watertight sewer lines 6 Seepage pit 9 Feedyard		10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage How many feet? 150		14 Abandoned water well <input checked="" type="radio"/> Oil well/Gas well 16 Other (specify below)	
Direction from well? Northeast					
FROM TO LITHOLOGIC LOG		FROM TO PLUGGING INTERVALS			
		440	335	CHLORINATED GRAVEL	
		335	320	HOLE PLUG	
		320	5	CEMENT GROUT	
		5	0	BACKFILL	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or <input checked="" type="radio"/> plugged under my jurisdiction and was completed on (mo/day/year) 3-17-95 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/yr) 3-17-95					
under the business name of HOWARD DRUG CO. BOX. 806 BEAVER, OK 73932 by (signature) <i>[Signature]</i>					
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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					

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