

PERMIT #T79-12

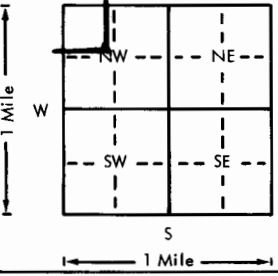
USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

CW Inv. #15450

Stanely A-#1

| | | | | | | | | | | |
|--|--|---------------------------------------|--|---------------------------|--|---------------------------------------|-----|--------------------------|--|--|
| 1. Location of well: County: Grant | | Fraction: SE 1/4 NW 1/4 NW 1/4 | | Section number: 13 | | Township number: T 30S S R 35W | | Range number: E/W | | |
| 2. Distance and direction from nearest town or city: From Satanta go 1m SW on Hwy 56 - 3M West - 1m North @ Street address of well location if in city: 1 3/4m West - South to location. | | | | | 3. Owner of well: Anadarko Production Company R.R. or street: c/o P. Gatlin, Box 351 City, state, zip code: Liberal, Kansas 67901 | | | | | |
| 4. Locate with "X" in section below: N W E S 1 Mile  | | | | | Sketch map: South to location 1 3/4m West 1m SW on Hwy 56 | | | | | |
| 5. Type and color of material | | | | | From | | To | | 6. Bore hole dia. <u>9</u> in. Completion date <u>1-27</u> Well depth <u>300</u> ft. | |
| Surface | | | | | 0 | | 2 | | 7. <input type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary | |
| Clay | | | | | 2 | | 12 | | 8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input checked="" type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> Lawn <input checked="" type="checkbox"/> Oil field water <input type="checkbox"/> Other | |
| Medium to large sand | | | | | 12 | | 24 | | 9. Casing: Material _____ Height: Above or below Threaded _____ Welded _____ Surface <u>28</u> in. RMP _____ PVC <input checked="" type="checkbox"/> Weight <u>2.78</u> lbs./ft. Dia. <u>5</u> in. to <u>200</u> ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. <u>.265</u> | |
| Clay 15% & gravel 85% | | | | | 24 | | 148 | | 10. Screen: Manufacturer's name _____ Sawed perf. Type <u>PVC</u> Dia. <u>5"</u> Slot/gauze _____ Length <u>100'</u> Set between <u>200</u> ft. and <u>300</u> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> yes Size range of material <u>1/8-3/16</u> | |
| Clay 30% & medium to large sand 70% | | | | | 148 | | 300 | | 11. Static water level: _____ mo./day/yr. <u>222</u> ft. below land surface Date <u>1-27-79</u> | |
| | | | | | | | | | 12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>50</u> g.p.m. | |
| | | | | | | | | | 13. Water sample submitted: _____ mo./day/yr. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Date _____ | |
| | | | | | | | | | 14. Well head completion: <input type="checkbox"/> Pitless adapter <u>28</u> Inches above grade | |
| | | | | | | | | | 15. Well grouted? <input checked="" type="checkbox"/> yes With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft. | |
| | | | | | | | | | 16. Nearest source of possible contamination: ft. <u>100</u> Direction <u>NE</u> Type <u>oilwell</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | |
| | | | | | | | | | 17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.p.m. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other | |
| | | | | | | | | | (Use a second sheet if needed) | |
| 18. Elevation: Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley | | 19. Remarks: | | | | | | | 20. Water well contractor's certification: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. Carlile Water Well Service, 118 Business name License No. _____ Address Box AA, Liberal, KS 67901 Signed <u>Edward E. Means</u> Date <u>2-9-79</u> Authorized representative | |

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Forward the white, blue and pink copies to the Department of Health and Environment

Form WWC-5