| Lease: W             | illiam B. Taylorva                                      | R WELL RECORD F               | orm WWC-5           | KSA 82         | a-1212                  |   |                               |   |
|----------------------|---|-------------------------------|---------------------|----------------|-------------------------|---|-------------------------------|---|
| LOCATION OF W        | ATER WELL: Fraction                                     |                               |                     | tion Number    | Township Nun            | nber                                    | Range N                       | lumber                                  |
| ounty: Sewar         | d :   | X4 C-NE 4 SW                  | 1/4                 | 30             | T 31                    | S                                       | R 34                          | E/W_                                    |
| istance and directi  | on from nearest town or city stree                      | t address of well if located  | within city?        | From Li        | iberal go 9             | mi No                                   | rth 7mi                       | West                                    |
| 10 mi No             | rth lmi West ½mi 1                                      | North East ont                | o loca              | tion.          |                         |   |                               |   |
|                      | OWNER: William B T                                      |                               | Compa               | ny Mobi        | il Oil                  |   |                               | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| R#, St. Address, E   | Box # c/o First Nat:                                    | ional Bank                    |                     |                | Board of Ag             | riculture, D                            | ivision of Wate               | er Resources                            |
| ity, State, ZIP Cod  | Liberal, K  | ansas 67901                   |                     |                | Application N           | lumber:                                 | T 82-                         | 362                                     |
| LOCATE WELL'S        | LOCATION WITH 4 DEPTH OF                                | COMPLETED WELL                | 340                 | ft. ELEV       | ATION:                  |   |                               |   |
| AN "X" IN SECT       | N Depth(s) Grou   | indwater Encountered 1        |                     |                |                         |   |                               |   |
|                      | 1 1   | ump test data: Well water     |                     |                |                         |   | •                             |   |
| NW -                 |   | 6.0 gpm: Well water           |                     |                |                         |   |                               |   |
| !                    |   | meter9in. to                  |                     |                |                         |   |                               |   |
| w                    |   |                               | Public wate         |                | 8 Air conditioning      |   |                               |   |
| X                    | 1 Domes   |                               |                     | ter supply     | -                       |   | •                             | below)                                  |
| SW -                 | 1 Dones   | •                             |                     |                | 10 Observation well     |   | Other (Specify                | pelow)                                  |
| 1 !                  | <b>'</b> ' ' ' ' ' '                                    | al/bacteriological sample sul |                     | ,              |                         |   |                               |   |
| <u> </u>             | s mitted  | ai/bacteriological sample sui | Diffilled to De     |                | ater Well Disinfected   | -                                       | No<br>No                      |   |
| TYPE OF BLANK        | CASING USED:  | 5 Wrought iron                | 8 Concre            |                | CASING JOIN             |   |                               | ped                                     |
| 1 Steel              | 3 RMP (SR)  | 6 Asbestos-Cement             |                     | (specify belo  |                         |   | d                             |   |
| 2 PVC                | 4 ABS   |                               |                     |                | w):<br>                 |   |                               |   |
|                      | ter <b>5</b> in. to <b>2</b> 0                          |                               |                     |                |                         |   |                               |   |
| _                    | e land surface28  |                               |                     |                |                         |   |                               | 1                                       |
| • •                  | OR PERFORATION MATERIAL:                                | III., weight                  | 7 PV                |                |                         |   | •                             | <b>6</b> · · · · · · · ·                |
|                      |   | E Fiberaless                  | 8 RM                |                |                         | tos-cemer                               |                               | İ                                       |
| 1 Steel              | 3 Stainless steel                                       | 5 Fiberglass                  | 9 AB                | , ,            |                         |   |                               |   |
| 2 Brass              | 4 Galvanized steel ORATION OPENINGS ARE:                | 6 Concrete tile               |                     | 3              | 8 Saw cut               | used (ope                               |                               | na holo)                                |
|                      |   |                               | wrapped<br>apped    |                | 9 Drilled holes         |   | 11 None (ope                  | l l                                     |
| 1 Continuous         |   | 7 Torch c                     |                     |                |                         |   |                               |   |
| 2 Louvered sh        |   | 260 ft. to                    |                     | 4              | 10 Other (specify)      |   |                               |   |
| CHEEN-PERFORA        |   | ft. to                        |                     |                |                         |   |                               |   |
| ODAVEL I             |   | 16.0 ft. to                   |                     |                |                         |   |                               | 1 '                                     |
| GRAVEL               | PACK INTERVALS: From From                               |                               |                     |                |                         |   |                               |   |
| ODOLIT MATERI        |   |                               |                     |                | Othor                   |   |                               | Į v                                     |
| GROUT MATERI         |   | 2 Cement grout                |                     |                | Other                   |   |                               |   |
| Grout Intervals: F   |   |                               | 11.                 |                |                         |   |                               | I .                                     |
|                      | source of possible contamination:                       |                               |                     |                | •                       |   | andoned wate<br>well/Gas well |   |
| ·                    |   | 7 Pit privy                   |                     |                | -                       |   |                               | I                                       |
| 2 Sewer lines        |   | 8 Sewage lagoo                | n                   |                | lizer storage           | 16 Ot                                   | her (specify be               | elow)                                   |
|                      | ewer lines 6 Seepage pit                                | 9 Feedyard                    |                     |                | cticide storage .       | • · · · · · · · · · · · · · · · · · · · |                               |   |
| FROM TO              | Northeast of water                                      |                               | FROM                | TO How ma      | any feet? 100           | THOLOGI                                 | CLOG                          |   |
| 0 2                  |   | 10 LOG                        | 111014              | 10             |                         | THOLOGI                                 | 0 100                         |   |
|                      | surface   |                               |                     |                |                         |   |                               | <b>I</b>                                |
| 2 43                 | sandy chay  |                               |                     |                |                         |   |                               | <u>U</u>                                |
| 43 125               | clay  |                               |                     |                |                         |   |                               |   |
| 125 190              | fine sand   |                               |                     |                | James A.                |   |                               |   |
| 190 230              | 1 4 4   |                               |                     |                |                         |   |                               |   |
| 230 249              | medium to lar   | ge_sand                       |                     |                |                         |   |                               |   |
|                      |   |                               |                     |                |                         |   |                               |   |
|                      |   |                               |                     |                |                         |   |                               |   |
|                      |   |                               |                     |                |                         |   |                               |   |
|                      |   |                               |                     |                |                         |   |                               |   |
|                      |   |                               |                     |                |                         |   |                               |   |
|                      |   |                               |                     | i              |                         |   |                               |   |
|                      |   |                               |                     |                |                         |   |                               |   |
|                      |   |                               |                     |                |                         |   |                               | i`:                                     |
|                      | 1   |                               |                     | <u> </u>       |                         |   |                               |   |
| CONTRACTORS          | S OR LANDOWNER'S CERTIFICA                              | ATION: This water well was    | (1) constru         | cted, (2) rec  | onstructed, or (3) plu  | gged unde                               | er my jurisdict               | ion and was                             |
| ompleted on (mo/d    | <sub>ay/year)</sub> June 28, 19                         | 82                            |                     |                | ord is true to the best |   |                               |   |
|                      | tor's License No 118                                    | This Water Wel                | I Record wa         | s completed    | on (mo/day/yr)          | . July                                  | 9, 198                        | <b>:2</b>   ;                           |
| nder the business    | name of Carlile Wate                                    | r Well Service                | Inc.                | by (signa      | ature) le duvand        | . <b>L</b>                              | means                         | _                                       |
| NSTRUCTIONS: U       | se typewriter or ball point pen, PLE                    | ASE PRESS FIRMLY and          | <b>PRINT</b> clearl | y. Please fill | in blanks, underline o  | r circle the                            |                               |   |
| hree copies to Kans  | as Department of Health and Environce for your records. | onment, Division of Environm  | ent, Environ        | mental Geolo   | gy Section, Topeka, F   | S 66620.                                | send one to W                 | A FER WELL                              |
| ZTTTETT GITU TELATIT | 5.75 101 your 1000100.                                  |                               |                     |                |                         |   |                               |   |