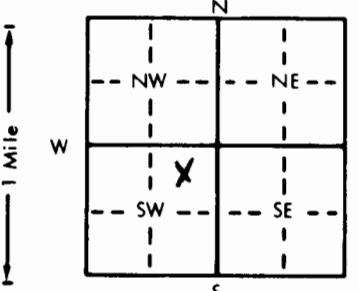


1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: Stevens		¼ C-NE ¼ SW ¼	22	T 31 S	R 35 E/W
Distance and direction from nearest town or city street address of well if located within city? From Woods go 11mi North 3/4mi West 1/4mi North to location.					
2 WATER WELL OWNER: Carl Slemph Mobil Oil					
RR#, St. Address, Box # : _____					
City, State, ZIP Code : Moscow, Kansas					
Board of Agriculture, Division of Water Resources					
Application Number: T 83-664					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: 400 ft. ELEVATION: _____			
		Depth(s) Groundwater Encountered 1. 157 ft. 2. _____ ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL 243 ft. below land surface measured on mo/day/yr 12/10/83			
		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 9 in. to 400 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) <u>Welded</u> _____					
7 Fiberglass _____ Threaded _____					
Blank casing diameter 5 in. to 280 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.					
Casing height above land surface 28 in., weight 2.78 lbs./ft. Wall thickness or gauge No. 256					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel 3 Stainless steel 5 Fiberglass <u>7 PVC</u> 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 280 ft. to 400 ft., From _____ ft. to _____ ft.					
From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From 220 ft. to 400 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 0 ft. to 10 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? Northeast of water well. How many feet? 100'					
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	2	surface			
2	24	sandy clay			
24	94	clay			
94	103	sandy clay			
103	256	medium to large sand			
256	310	clay			
310	376	medium to large sand			
376	400	clay			
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) December 10, 1983 and this record is true to the best of my knowledge and belief. Kansas					
Water Well Contractor's License No. 118 This Water Well Record was completed on (mo/day/yr) December 22, 1983					
under the business name of Carlile Water Well Service, Inc. by (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.					