

[1] LOCATION OF WATER WELL:		Fraction	Township Number	Range Number
County: <u>BARBER</u>		<u>SW ¼ SW ¼ NW ¼</u>	Section Number <u>12</u>	Township Number T <u>32 S</u>
				Range Number R <u>12 E</u>
Distance and direction from nearest town or city street address of well if located within city? <u>Jct. 281 AND 160</u>				
[2] WATER WELL OWNER: <u>ELMER SMITH OIL COMPANY</u>				
RR#, St. Address, Box #: <u>PO BOX 1714</u>				
City, State, ZIP Code: <u>CLINTON, OK 73601</u>				
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: <u>12.5</u> ft. ELEVATION:		
		Depth(s) Groundwater Encountered 1. <u>7.0</u> ft. 2. _____ ft. 3. _____ ft.		
		WELL'S STATIC WATER LEVEL <u>6.62</u> ft. below land surface measured on mo/day/yr <u>8/18/95</u>		
		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 <u>8</u> in. to _____ ft., and _____ in. to _____ ft.		WELL WATER TO BE USED AS:		
1 Domestic		3 Feedlot	6 Oil field water supply	9 Dewatering
2 Irrigation		4 Industrial	7 Lawn and garden only	10 Monitoring well
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u>		If yes, mo/day/yr sample was submitted _____		
Water Well Disinfected? Yes _____ No <u>X</u>				
[5] TYPE OF BLANK CASING USED:				
1 Steel		3 RMP (SR)	5 Wrought iron	8 Concrete tile
2 PVC		4 ABS	6 Asbestos-Cement	9 Other (specify below)
Blank casing diameter <u>2</u> in. to _____ ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.		Casing joints: Glued _____ Clamped _____		
Casing height above land surface <u>FLUSH 0</u> in. weight <u>703</u> lbs./ft. Wall thickness or gauge No. <u>154</u>		Welded _____ Threaded <u>FLUSH</u>		
TYPE OF SCREEN OR PERFORATION MATERIAL:				
1 Steel		3 Stainless steel	5 Fiberglass	8 RMP (SR)
2 Brass		4 Galvanized steel	6 Concrete tile	9 ABS
SCREEN OR PERFORATION OPENINGS ARE:		10 Asbestos-cement		
1 Continuous slot		3 Mill slot	8 Saw cut	11 None (open hole)
2 Louvered shutter		4 Key punched	9 Drilled holes	
SCREEN-PERFORATED INTERVALS: From <u>2.5</u> ft. to <u>12.5</u> ft.		10 Other (specify) _____		
GRAVEL PACK INTERVALS: From <u>2.0</u> ft. to <u>12.5</u> ft.				
[6] GROUT MATERIAL:				
1 Neat cement		2 Cement grout	3 Bentonite	4 Other _____
Grout Intervals: From <u>2.0</u> ft. to <u>0.5</u> 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
2 Sewer lines		5 Cess pool	8 Sewage lagoon	11 Fuel storage
3 Watertight sewer lines		6 Seepage pit	9 Feedyard	12 Fertilizer storage
				13 Insecticide storage
Direction from well?		How many feet?		
FROM	TO	LITHOLOGIC LOG	FROM	TO
0	0.5	ASPHALT		
0.5	11.5	SILT		
11.5	12.5	SAND, FINETO COARSE GRAINS, SLIGHTLY SILTY		
[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) <u>8/18/95</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>531</u> This Water Well Record was completed on (mo/day/yr) <u>8/21/95</u> under the business name of <u>GSI</u> by (signature) <u>Steve Nauden</u>				

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.