

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Gomache</u>		<u>1/4 NE 1/4 NW 1/4</u>	<u>32</u>	<u>T 32 S</u>	<u>R 19 E (W)</u>
Distance and direction from nearest town or city street address of well if located within city? <u>4E 2N 1/2W OF PROTECTION, KS</u>					
2 WATER WELL OWNER: <u>Lear Petroleum Company</u>					
RR#, St. Address, Box # : <u>6401 NW Grand Blvd. Suite 200</u>			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : <u>Oklahoma City, Oklahoma 73116</u>			Lease: <u>Bird 1-32</u> Application Number:		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>57</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. <u>4</u> ft. 2. _____ ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL <u>4</u> ft. below land surface measured on mo/day/yr <u>20 April 83</u>			
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Est. Yield <u>30</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Bore Hole Diameter <u>10</u> in. to <u>57</u> 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 6 Oil field water supply 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 <u>X</u> ; If yes, mo/day/yr sample was submitted _____			
		Water Well Disinfected? Yes <u>X</u> No _____			
5 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)		CASING JOINTS: Glued <u>X</u> Clamped _____	
2 PVC		4 ABS		Welded _____	
Blank casing diameter <u>5</u> in. to <u>37</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.		5 Wrought iron		Threaded _____	
Casing height above land surface <u>12</u> in., weight _____ lbs./ft. Wall thickness or gauge No. <u>214</u>		6 Asbestos-Cement			
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 Fiberglass			
1 Steel		8 Concrete tile			
2 Brass		9 Other (specify below) _____			
3 Stainless steel		10 Asbestos-cement			
4 Galvanized steel		8 RMP (SR)			
5 Fiberglass		9 ABS			
6 Concrete tile		11 Other (specify) _____			
SCREEN OR PERFORATION OPENINGS ARE:		12 None used (open hole)			
1 Continuous slot		5 Gauzed wrapped		8 Saw cut	
2 Mill slot		6 Wire wrapped		11 None (open hole)	
3 Louvered shutter		7 Torch cut		9 Drilled holes	
4 Key punched		10 Other (specify) _____			
SCREEN-PERFORATED INTERVALS: From <u>37</u> ft. to <u>57</u> ft., From _____ ft. to _____ ft.					
From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From <u>10</u> ft. to <u>57</u> 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 <u>0</u> ft. to <u>10</u> 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	
				14 Abandoned water well	
				11 Fuel storage	
				15 Oil well/Gas well	
				12 Fertilizer storage	
				16 Other (specify below) <u>NONE</u>	
				13 Insecticide storage	
Direction from well?		How many feet?			
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	2	Soil, sandy			
2	8	Sand, fine			
8	27	Clay, tan and sandy			
27	34	Shale, red			
34	55	Sand, fine red			
55	57	Shale, red			
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>20 APR 83</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>325</u> This Water Well Record was completed on (mo/day/yr) <u>6 Jul 83</u> under the business name of <u>Central Well & Pump Inc.</u> by (signature) <u>[Signature]</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, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.					

OFFICE USE ONLY

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