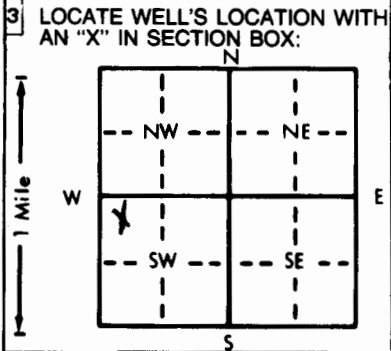


| | | | | |
|---|---|-----------------------------|----------------------------------|--------------------------------|
| 1 LOCATION OF WATER WELL: County: Stevens | Fraction NW 1/4 NW 1/4 SW 1/4 | Section Number 36 | Township Number T 32 S | Range Number R 36 EW |
|---|---|-----------------------------|----------------------------------|--------------------------------|

Distance and direction from nearest town or city street address of well if located within city? **From Woods go 3.38mi North 1/4mi east into location. (Lone Star Church)**

2 WATER WELL OWNER: **Owen Dowdy Mobil Oil Corp.**
 RR#, St. Address, Box # : **19 Polo Drive** Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : **Colorado Springs, Colorado 80906** Application Number: **T 85-135**



4 DEPTH OF COMPLETED WELL... **420** ft. ELEVATION:

Depth(s) Groundwater Encountered 1. **260** ft. 2. ft. 3. ft.

WELL'S STATIC WATER LEVEL **160** ft. below land surface measured on **mo/day/yr 3/20/86**

Pump test data: Well water was ft. after hours pumping gpm
 Est. Yield **100** gpm: Well water was ft. after hours pumping gpm

Bore Hole Diameter **10** in. to **420** 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 |
| 2 Irrigation | 4 Industrial | 7 Lawn and garden only |
| | | 10 Observation well |
| | | 9 Dewatering |
| | | 12 Other (Specify below) |

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: Glued Clamped |
| 2 PVC | 4 ABS | 6 Asbestos-Cement | 9 Other (specify below) | Welded |
| | | 7 Fiberglass | | Threaded |

Blank casing diameter **6 5/8"** in. to **320** ft., Dia in. to ft. Dia in. to ft.

Casing height above land surface **28** in., weight **2.85** lbs./ft. Wall thickness or gauge No. **265**

TYPE OF SCREEN OR PERFORATION MATERIAL:

| | | | | |
|---------|--------------------|-----------------|------------|--------------------------|
| 1 Steel | 3 Stainless steel | 5 Fiberglass | 8 RMP (SR) | 10 Asbestos-cement |
| 2 Brass | 4 Galvanized steel | 6 Concrete tile | 9 ABS | 11 Other (specify) |
| | | | | 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 **300** ft. to **360** ft., From ft. to ft.

From **380** ft. to **420** ft., From ft. to ft.

GRAVEL PACK INTERVALS: From **240** ft. to **420** 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? **Southeast of water well** How many feet? **200'**

| FROM | TO | LITHOLOGIC LOG | FROM | TO | LITHOLOGIC LOG |
|------|-----|-----------------------------|------|----|----------------|
| 0 | 2 | surface | | | |
| 2 | 27 | clay | | | |
| 27 | 55 | sandy clay | | | |
| 55 | 121 | 40% gravel & 60% sandy clay | | | |
| 121 | 143 | sandy clay | | | |
| 143 | 165 | med. to large sand | | | |
| 165 | 239 | sandy clay | | | |
| 239 | 288 | clay | | | |
| 288 | 342 | 20% clay & 80% fine sand | | | |
| 342 | 363 | fine sand | | | |
| 363 | 381 | 60% clay & 40% sandy clay | | | |
| 381 | 402 | med. to large sand | | | |
| 402 | 416 | 40% clay & 60% sandy clay | | | |
| 416 | 420 | 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) .. **March 20, 1986** 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) .. **March 27, 1986** under the business name of **Carlile Water Well Service, Inc.** by (signature) *[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, Office of Oil Field and Environmental Geology, Regulation and Permitting Section, Topeka, Kansas 66620-7500, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.

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