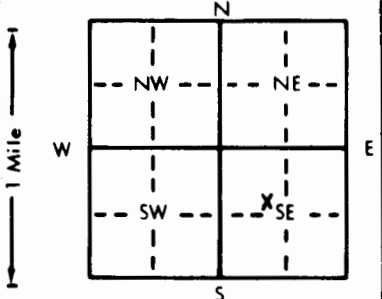


1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: Stevens		SE 1/4 NW 1/4 SE 1/4	10	T 32 S	R 37 W

Distance and direction from nearest town or city street address of well if located within city? **From Jct. 270 & 51 @ Hugoton, KS.,**
7 Miles N, 1 Mile East, 1/2 Mile N, west into location.

2 WATER WELL OWNER: **Steve Davis** **Mobil Oil Corp.**
 RR#, St. Address, Box # : **HC - 01** **Board of Agriculture, Division of Water Resources**
 City, State, ZIP Code : **Hugoton, KS 67951** **Application Number: T89-353**

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL **360** ft. ELEVATION: _____
 Depth(s) Groundwater Encountered **1 158** ft. **2** ft. **3** ft.
 WELL'S STATIC WATER LEVEL **158** ft. below land surface measured on mo/day/yr **8-5-89**
 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 **9** in. to **360** ft., and _____ in. to _____ ft.
 WELL WATER TO BE USED AS:
 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 Monitoring well
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No **X**; If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected? Yes **X** No _____

5 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued **X** Clamped _____
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____
 7 Fiberglass Threaded _____

Blank casing diameter **5.563** in. to **220** ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface **28** in., weight **2.93** lbs./ft. Wall thickness or gauge No. **2.65**

TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass **7 PVC** 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 **180** ft. to **200** ft., From **220** ft. to **340** ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From **24** ft. to **170** ft., From **180** ft. to **360** 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 **2** ft., From **2** ft. to **24** ft., From **170** ft. to **180** 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? **Northwest** How many feet? **165'**

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Surface			
3	42	40% Clay, 60% white sand			
42	55	Red Clay			
55	80	Tan Sandy Clay			
80	110	50% Fine Sand, 50% med/lrg sand			
110	150	White sandy clay			
150	175	Fine Sand			
175	220	80% Clay, 20% Sandy clay			
220	250	50% Fine sand, 50% med/lrg sand			
250	310	50% Clay, 10% fine sand, 40% sandy clay			
310	325	40% Fine sand, 60% med/lrg sand			
325	340	30% Fine sand, 70% Sandy clay			
340	360	5% Clay, 15% fine sand, 80% sandy 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) **8-5-89** 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) **8-16-89** under the business name of **Carlile Water Well Service, Inc.** by (signature) _____