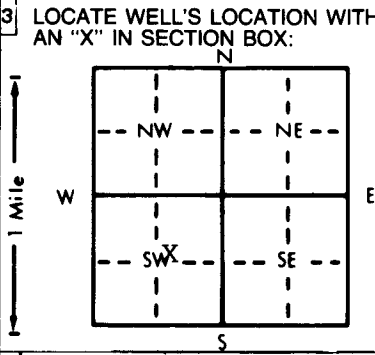


1 LOCATION OF WATER WELL: County: Morton Fraction: SW 1/4 NE 1/4 SW 1/4 Section Number: 5 Township Number: T 32 S Range Number: R 39 EW

Distance and direction from nearest town or city street address of well if located within city?
10 3/4NE/Richfield, KS--

2 WATER WELL OWNER: OXY USA, Inc. #7 Yeager B
 RR#, St. Address, Box # : P. O. Box 26100 Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : Oklahoma City, OK 73126-0100 Application Number: 93-0068



4 DEPTH OF COMPLETED WELL: 280 ft. ELEVATION: _____
 Depth(s) Groundwater Encountered 1. 215 ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL 215 ft. below land surface measured on mo/day/yr 2/05/93
 Pump test data: Well water was 225 ft. after 1 hours pumping 80 gpm
 Est. Yield 80 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter: 9 1/2 in. to 280 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 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 in. to 280 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface 24 in., weight 2.902 lbs./ft. Wall thickness or gauge No. 280 SDR21
 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 200 ft. to 280 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 80 ft. to 280 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 Hole Plug
 Grout Intervals: From 1 ft. to 20 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? Southwest How many feet? 250

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	Surface Soil			
1	15	Sandy Clay			
15	35	Clay			
35	57	Sandy Clay			
57	79	Sand & Gravel			
79	98	Clay			
98	146	Sandy Clay			
146	168	Sand			
168	224	Sandy clay			
224	280	Sand			

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) 2/05/93 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. KWWCL-430. This Water Well Record was completed on (mo/day/yr) 2/05/93 under the business name of Howard Drlg. Co. Box 806 Beaver, OK 73932 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, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.