

1 LOCATION OF WATER WELL		Fraction	Section Number		Township Number		Range Number	
County: Meade		E 1/4 SW 1/4 SE 1/4	19		T 33 S		R 28 E/W	
Distance and direction from nearest town or city? From Meade Lake go 1mi East 1mi South 1mi East North & East into Location.				Street address of well if located within city?				
2 WATER WELL OWNER: Diamond Shamrock				Verbal approval on 8th August				
RR#, St. Address, Box # Route #1 Box 23				Board of Agriculture, Division of Water Resources				
City, State, ZIP Code Canadian, Texas 79014				Application Number: T 80-393				
3 DEPTH OF COMPLETED WELL 240 ft. Bore Hole Diameter 9 in. to ft. and in. to ft.								
Well Water to be used as:								
1 Domestic 3 Feedlot 6 <u>Oil field water supply</u> 9 Dewatering 12 Other (Specify below)								
2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well								
Well's static water level 65 ft. below land surface measured on August month 11th day 1980 year								
Pump Test Data: Well water was ft. after hours pumping gpm								
Est. Yield 60 gpm: Well water was ft. after hours pumping gpm								
4 TYPE OF BLANK CASING USED:				Casing Joints: Glued Clamped				
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded								
2 <u>PVC</u> 4 ABS 7 Fiberglass Threaded								
Blank casing dia 5" in. to 180 ft. Dia in. to ft. Dia in. to ft.								
Casing height above land surface 28 in. weight 2.78 lbs./ft. Wall thickness or gauge No .256								
TYPE OF SCREEN OR PERFORATION MATERIAL:								
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify)								
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)								
Screen or Perforation Openings Are:				8 Saw cut 11 None (open hole)				
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes								
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)								
Screen-Perforation Dia 5 in. to 60 ft. Dia in. to ft. Dia in. to ft.								
Screen-Perforated Intervals: From 180 ft. to 240 ft. From ft. to ft.								
Gravel Pack Intervals: From 60 ft. to 240 ft. From ft. to ft.								
5 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other								
Grouted Intervals: From 0 ft. to 10 ft. From ft. to ft. From ft. to ft.								
What is the nearest source of possible contamination:				10 Fuel storage 14 Abandoned water well				
1 Septic tank 4 Cess pool 7 Sewage lagoon 11 Fertilizer storage 15 Oil well/Gas well								
2 Sewer lines 5 Seepage pit 8 Feed yard 12 Insecticide storage 16 Other (specify below)								
3 Lateral lines 6 Pit privy 9 Livestock pens 13 Watertight sewer lines								
Direction from well North East How many feet 100 ? Water Well Disinfected? <u>Yes</u> No								
Was a chemical/bacteriological sample submitted to Department? Yes <u>No</u> If yes, date sample was submitted month day year: Pump Installed? Yes <u>No</u> Volts								
If Yes: Pump Manufacturer's name Model No. HP								
Depth of Pump Intake ft. Pumps Capacity rated at gal. min.								
Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other								
6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on August month 11th day 1980 year								
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 August month 21th day 1980 year under the business name of Carlile Water Well Service, Inc. by (signature) <i>Edward E. Means</i>								
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG	
		0	2	Surface				
		2	65	Sandy clay				
		65	80	Medium to large sand				
		80	115	Clay (blue)				
		115	230	Medium to large sand				
		230	240	Sandy clay				
ELEVATION:								
Depth(s) Groundwater Encountered 1 175 ft. 2 ft. 3 ft. 4 ft.				(Use a second sheet if needed)				
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, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.								