

USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

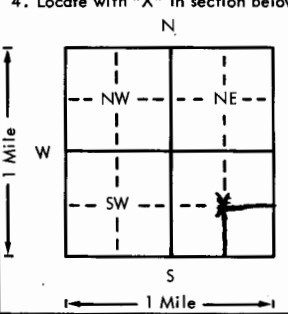
WATER WELL RECORD
KSA 82a-1201-1215

Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

Permit no 79-221

CWW 16392

Arkalon #1-10

1. Location of well:	County Seward	Fraction 1/4 1/4 C-SE 1/4	Section number 10	Township number T 33 S	Range number R 32 E/W
2. Distance and direction from nearest town or city: From Liberal go East to Helium Plant then 2 mi North 1 1/2 mi West to location			3. Owner of well: Sage Drilling Company R.R. or street: 222 Sutton Place City, state, zip code: Wichita, Kansas 67202		
4. Locate with "X" in section below: 			6. Bore hole dia. 9 in. Completion date 10-23-79 Well depth 280 ft.		
5. Type and color of material			7. <input checked="" type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary		
			8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> Lawn <input checked="" type="checkbox"/> Oil field water <input type="checkbox"/> Other		
			9. Casing: Material _____ Height: <u>Above</u> or below Threaded _____ Welded _____ Surface 28 in. RMP _____ PVC <input checked="" type="checkbox"/> Weight 2.78 lbs./ft. Dia. 5 in. to 180 depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 256		
			10. Screen: Manufacturer's name _____ Type PVC Sawn Dia. 5" Slot/gauze .303 Length 100 Set between 180 ft. and 280 ft. Gravel pack? <input checked="" type="checkbox"/> Yes Size range of material 1/8-3/16		
			11. Static water level: _____ mo./day/yr. 215 ft. below land surface Date 10-23-79		
			12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 60 g.p.m.		
			13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
			14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter 28 inches above grade		
			15. Well grouted? <input checked="" type="checkbox"/> Yes With: <input checked="" type="checkbox"/> Neat cement _____ Bentonite _____ Concrete _____ Depth: From 0 ft. to 10 ft.		
			16. Nearest source of possible contamination: ft. 100 Direction N.E. Type Oil well Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
			17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.p.m. Type: <input type="checkbox"/> Submersible _____ Turbine _____ <input type="checkbox"/> Jet _____ Reciprocating _____ <input type="checkbox"/> Centrifugal _____ Other _____		
18. Elevation:			20. Water well contractor's certification: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. #118 Carlile Water Well Service Business name _____ License No. _____ Address Box AA Liberal, Kansas Signed Edward E. Means Date 11-2-79 Authorized representative		
19. Remarks:					

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