

1 LOCATION OF WATER WELL: County: SEWARD	Fraction SE 1/4 SE 1/4 NE 1/4	Section Number 19	Township Number T 33 S	Range Number R 34 EW
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Distance and direction from nearest town or city street address of well if located within city?
7 North and 7 West and 1/2 South of Liberal, Kansas

2 WATER WELL OWNER: RR#, St. Address, Box # : City, State, ZIP Code :	Helen Guttridge Rt. #1, Box 155 Liberal, Kansas 67901	Board of Agriculture, Division of Water Resources Application Number: ---
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3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL... 300..... ft. ELEVATION: Slope.....
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Depth(s) Groundwater Encountered 1. Not available ft. 2. ft. 3. ft.

WELL'S STATIC WATER LEVEL .. 145..... ft. below land surface measured on mo/day/yr Oct. 9, 1989.....

Pump test data: Well water was ft. after hours pumping gpm

Est. Yield ... 20.. gpm: Well water was ft. after hours pumping gpm

Bore Hole Diameter... 10..... in. to 300..... ft., and..... in. to ft.

WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well

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; If yes, mo/day/yr sample was submitted

Water Well Disinfected? Yes No

5 TYPE OF BLANK CASING USED:	5 Wrought iron 8 Concrete tile	CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped
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1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded

PVC 4 ABS 7 Fiberglass Threaded.....

Blank casing diameter 5..... in. to 260..... ft., Dia in. to ft., Dia in. to ft.

Casing height above land surface..... 20..... in., weight 2.8..... lbs./ft. Wall thickness or gauge No. 265.....

TYPE OF SCREEN OR PERFORATION MATERIAL:	10 Asbestos-cement	11 Other (specify)
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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:	5 Gauzed wrapped	11 None (open hole)
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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-PERFORATED INTERVALS:	From 260..... ft. to 300..... ft., From ft. to ft.	From ft. to ft., From ft. to ft.
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GRAVEL PACK INTERVALS:	From 20..... ft. to 300..... ft., From ft. to ft.	From ft. to ft., From ft. to ft.
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6 GROUT MATERIAL:	1 Neat cement 2 Cement grout 3 Bentonite	4 Other <input checked="" type="checkbox"/> Baroid Hole Plug
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Grout Intervals: From 260 ft. to 300 ft., From ft. to ft., From ft. to ft.

What is the nearest source of possible contamination:

<input checked="" type="checkbox"/> 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? North How many feet? 100

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	Topsoil			
2	61	Clay			
61	120	Sandy Clay			
120	180	Clay			
180	200	Fine Sand			
200	259	Clay			
259	300	Med. to lar. Sand & Gravel			

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) October 10, 1989..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 252..... This Water Well Record was completed on (mo/day/year) October 23, 1989..... under the business name of FRIESEN WINDMILL & SUPPLY INC. by (signature) <i>[Signature]</i>

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 Protection, Topeka, Kansas 66620-7320. Telephone: 913-296-5514. Send one to WATER WELL OWNER and retain one for your records.

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