

PERMIT #T79-5

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

Fincham D-#2

CWW Inv. #15379

1. Location of well:	County Seward	Fraction C 1/4 SE 1/4 SE 1/4	Section number 29	Township number T 33S	Range number S R 34W E/W
2. Distance and direction from nearest town or city: From Liberal go 9m North - 6m West - 1 3/4m South - West to location.			3. Owner of well: Anadarko Production Company R.R. or street: c/o P. Gatlin, Box 351 City, state, zip code: Liberal, Kansas 67901		
4. Locate with "X" in section below: N W E S 1 Mile		Sketch map: <i>Handwritten sketch showing well location relative to Liberal, Kansas. Includes directions: 9m North, 6m West, 1 3/4m South, West to location.</i>		6. Bore hole dia. <u>9</u> in. Completion date <u>1-10-79</u> Well depth <u>260</u> ft.	
5. Type and color of material		From		To	
		Surface		0 2	
		Fine sand		2 45	
		Clay		45 62	
		Medium to large sand		62 70	
		Clay & medium to large sand 15-85		70 148	
		Clay & fine sand 40-60		148 195	
		Fine sand		195 202	
		Medium to large sand		202 260	
		(Use a second sheet if needed)			
				8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input checked="" 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: Above or below Threaded _____ Welded _____ Surface <u>28</u> in. RMP _____ PVC <input checked="" type="checkbox"/> Weight <u>2.78</u> lbs./ft. Dia. <u>5</u> in. to <u>180</u> ft. depth; Wall Thickness: inches or Dia. _____ in. to _____ ft. depth; gage No. <u>265</u>	
				10. Screen: Manufacturer's name _____ <u>Sawed perf.</u> Type <u>PVC</u> Dia. <u>5"</u> Slot/gauze _____ Length <u>80'</u> Set between <u>180</u> ft. and <u>260</u> ft. _____ ft. and _____ ft. Gravel pack? <input checked="" type="checkbox"/> yes Size range of material <u>1/8-3/16</u>	
				11. Static water level: _____ mo./day/yr. <u>115</u> ft. below land surface Date <u>1/10/79</u>	
				12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield <u>50</u> 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 type="checkbox"/> Pitless adapter <u>28</u> inches above grade	
				15. Well grouted? <input checked="" type="checkbox"/> yes With: <input checked="" type="checkbox"/> Neat cement _____ Bentonite _____ Concrete _____ Depth: From <u>0</u> ft. to <u>10</u> ft.	
				16. Nearest source of possible contamination: ft. <u>100</u> Direction <u>NE</u> Type <u>oilwell</u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes _____ 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:		19. Remarks:		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. Carlile Water Well Service 118 Business name _____ License No. _____ Address <u>Box AA, Liberal, KS 67901</u> Signed <u>Edward E. Means</u> Date <u>1-17-79</u> Authorized representative	
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input type="checkbox"/> Valley					

T 33
 R 34W
 S R 34W
 E/W
 29
 C
 SE SE
 SE SE

Forward the white, blue and pink copies to the Department of Health and Environment

Form WWC-5