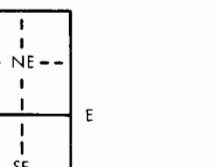


Kansas Department of Health and
Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

Guyer B-#1

County	Stevens	Fraction N¹/₂ SW 1/4	Section number 3	Township number T 33S S	Range number R 38W E/W
1. Location of well:			2. Distance and direction from nearest town or city: From Elevator at Hugoton go 5m. West - 1 1/2 m North - East to location.		
3. Owner of well: Anadarko Production Company R.R. or street: Box 351, c/o P. Gatlin City, state, zip code: Liberal, Kansas 67901					
4. Locate with "X" in section below: <div style="text-align: center;"></div>			Sketch map: <div style="text-align: center;"><p>East to X Loc. 5m. WEST of Hugoton Elevators 1 1/2 mile NORTH</p></div>		
5. Type and color of material			6. Bore hole dia. <u>9</u> in. Completion date <u>10-27</u> Well depth <u>260</u> ft.		
			7. 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: 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>200</u> ft. depth Wall Thickness: inches or Dia. <u>5</u> in. to <u>280</u> 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>60'</u> Set between <u>200</u> ft. and <u>280</u> ft. Gravel pack? <u>yes</u> 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>10-27-78</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. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date _____		
			14. Well head completion: Pitless adapter <u>28</u> inches above grade		
			15. Well grouted? <u>yes</u> 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 <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other		
18. Elevation:			19. Remarks:		
<div style="margin-top: 20px;">Topography: ____ Hill ____ Slope <input checked="" type="checkbox"/> Upland ____ Valley</div>			(Use a second sheet if needed)		
			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. <u>Carlile water Well Service 118</u> Business name License No. _____ Address <u>Box AA, Liberal, Kansas</u> Signed <u>Edward E. Miano</u> Date <u>11-1-</u> Authorized representative		