

1 LOCATION OF WATER WELL: County: <b>MORTON</b>	Fraction <b>S2 1/4 S2 1/4 NE 1/4</b>	Section Number <b>28</b>	Township Number <b>T 33 S</b>	Range Number <b>R 42W E/W</b>
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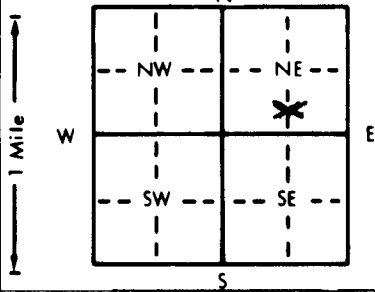
Distance and direction from nearest town or city street address of well if located within city?

**9 1/2 MILES NORTH FROM ELKHART**

2 WATER WELL OWNER: **OXY USA**  
 RR#, St. Address, Box # : **BOX 26100**  
 City, State, ZIP Code : **OKLAHOMA CITY, OK 73126-0100**

#2 WHITE "C"  
 Board of Agriculture, Division of Water Resources  
 Application Number: **OXY Permitted**

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL... **200** ft. ELEVATION: .....

Depth(s) Groundwater Encountered 1... **100** ft. 2... ..ft. 3... ..ft.

WELL'S STATIC WATER LEVEL... **100** ft. below land surface measured on mo/day/yr ... **4-27-95** .....

Pump test data: Well water was ... **120** ft. after ... **1** hours pumping ... **100** gpm

Est. Yield ... **100** gpm: Well water was ... ft. after ... hours pumping ... gpm

Bore Hole Diameter... **11** in. to ... **200** ft., and... in. to ... ft.

WELL WATER TO BE USED AS:

1 Domestic	3 Feedlot	<b>6</b> Oil field water supply	9 Dewatering	11 Injection well
2 Irrigation	4 Industrial	7 Lawn and garden only	10 Monitoring well	12 Other (Specify below)

Was a chemical/bacteriological sample submitted to Department? Yes.....No...**X**.....; If yes, mo/day/yr sample was submitted

Water Well Disinfected? Yes **X** No

5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued .. <b>X</b> .. Clamped .....
<b>2</b> PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded .....
		7 Fiberglass		Threaded .....

Blank casing diameter ... **5** in. to ... **200** ft., Dia ... in. to ... ft., Dia ... in. to ... ft.

Casing height above land surface... **24** in., weight ... **2.902** lbs./ft. Wall thickness or gauge No. ... **280 SDR 21** .....

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless steel	5 Fiberglass	<b>7</b> PVC	10 Asbestos-cement
2 Brass	4 Galvanized steel	6 Concrete tile	8 RMP (SR)	11 Other (specify) .....
			9 ABS	12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot	3 Mill slot	5 Gauzed wrapped	<b>8</b> Saw cut	11 None (open hole)
2 Louvered shutter	4 Key punched	6 Wire wrapped	9 Drilled holes	
		7 Torch cut	10 Other (specify) .....	

SCREEN-PERFORATED INTERVALS: From ... **100** ft. to ... **200** ft., From ... ft. to ... ft.

GRAVEL PACK INTERVALS: From ... **75** ft. to ... **200** ft., From ... ft. to ... ft.

6 GROUT MATERIAL: **1** Neat cement 2 Cement grout 3 Bentonite **4** Other ... **HOLE PLUG** .....

Grout Intervals: From ... **1** ft. to ... **20** ft., From ... ft. to ... ft., From ... ft. to ... ft.

What is the nearest source of possible contamination:

1 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	<b>15</b> 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? **Southeast** How many feet? **220**

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	8	SANDY CLAY			
8	13	SAND			
13	34	CLAY			
34	78	SANDY CLAY & SAND STONE			
78	111	SAND & GRAVEL & SAND STREAKS			
111	118	CLAY			
118	126	SANDY CLAY & SAND			
126	138	SAND			
138	149	CLAY			
149	167	<del>SANDY CLAY</del> & FINE SAND			
167	178	SAND & SAND STONE			
178	200	CLAY & SANDY CLAY			

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) ... **4-27-95** ... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. ... **KWCL-430** ... This Water Well Record was completed on (mo/day/year) ... **4-27-95** ... under the business name of **HOWARD DRUG CO. BOX 806 BEAVER, OK 73932** by (signature) *[Signature]*

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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

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