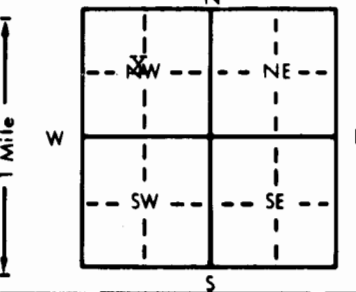


1 LOCATION OF WATER WELL: Fraction $\frac{1}{4}$ $\frac{1}{4}$ **N C-NW** $\frac{1}{4}$ Section Number **34** Township Number **34S** Range Number **31W**
 County: **Seward** T S R EW

Distance and direction from nearest town or city street address of well if located within city?
From Liberal, Kansas 12 1/2 Miles East and 1/2 Mile North into location.

2 WATER WELL OWNER: **Bryan White**
 RR#, St. Address, Box #: **P.O. Box 251** Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: **Liberal, KS 67901** Application Number:

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


4 DEPTH OF COMPLETED WELL: **297** ft. ELEVATION:
 Depth(s) Groundwater Encountered **205** ft. 2. **205** ft. 3. **8-5-87** ft.
 WELL'S STATIC WATER LEVEL **205** ft. below land surface measured on mo/day/yr
 Pump test data: Well water was **100** ft. after **9** hours pumping **297** gpm
 Est. Yield **100** gpm: Well water was **9** ft. after **297** hours pumping **297** gpm
 Bore Hole Diameter **9** in. to **297** ft., and **297** in. to **297** ft.
 WELL WATER TO BE USED AS:
 5 Public water supply 8 Air conditioning 11 Injection well
 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well **Stock Well**
 Was a chemical/bacteriological sample submitted to Department? Yes **No** If yes, mo/day/yr sample was submitted
 Water Well Disinfected? Yes **Yes** No

5 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: **Glued** Clamped
 2 **PVC** 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded
 Blank casing diameter **5.563** in. to **237** ft., Dia. **2.93** in. to **265** ft., Dia. **3.57** in. to **327** ft., Dia.
 Casing height above land surface **28** in., weight **2.93** lbs./ft. Wall thickness or gauge No. **327**
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 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:
 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 **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 **217** ft. to **237** ft., From **257** ft. to **297** ft., From **25** ft. to **297** ft.
 GRAVEL PACK INTERVALS: From **25** ft. to **297** ft., From **25** ft. to **297** ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 **Bentonite** 4 Other **Hole Plug**
 Grout Intervals: From **5** ft. to **25** ft., From **25** ft. to **297** ft., From **25** ft. to **297** ft.
 What is the nearest source of possible contamination: **None**
 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 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? **Not Applicable.** How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	2	surface			
2	10	sandy clay			
10	40	caliche			
40	45	blue clay			
45	63	50% med. to lar. sand, 50% caliche			
63	185	med. to large sand			
185	190	clay			
190	200	sandy clay			
200	215	70% clay, 30% med. to large sand			
215	225	clay			
225	240	med. to large sand			
240	255	40% clay, 60% sandy clay			
255	265	clay			
265	275	30% clay, 70% sandy clay			
275	297	10% clay, 40% med to large sand, 50% 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) **August 5, 1987** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **118** This Water Well Record was completed on (mo/day/yr) **August 25, 1987**
 under the business name of **Carlile Water Well Service, Inc.** by (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 Protection, Topeka, Kansas 66620-7320, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.