

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <b>Seward</b>	<b>NE 1/4 SW 1/4 NE 1/4</b>	<b>11</b>	<b>T 34 S</b>	<b>R 34 E/W</b>

Distance and direction from nearest town or city street address of well if located within city? **From Liberal go 5mi North 3mi West 1/4mi South and west into location.**

2 WATER WELL OWNER **Gladys Garmor Cabot Corp.**  
 RR#, St. Address, Box # : **P.O. Box 152** Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code : **Payette, Idaho 83661** Application Number: **T 85-702**

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL: <b>327</b> ft. ELEVATION:
	Depth(s) Groundwater Encountered 1. <b>211</b> ft. 2. _____ ft. 3. _____ ft.
	WELL'S STATIC WATER LEVEL <b>116</b> ft. below land surface measured on <b>mo/day/yr 8/9/85</b>
	Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
	Est. Yield <b>75</b> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
Bore Hole Diameter <b>9</b> in. to <b>327</b> ft., and _____ in. to _____ ft.	
WELL WATER TO BE USED AS:	
5 Public water supply      8 Air conditioning      11 Injection well 1 Domestic      3 Feedlot <u>6 Oil field water supply</u> 9 Dewatering      12 Other (Specify below) 2 Irrigation      4 Industrial      7 Lawn and garden only      10 Observation 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:

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

Blank casing diameter **5** in. to **220** ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Casing height above land surface **28** in., weight **2.85** lbs./ft. Wall thickness or gauge No. **265**

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless steel	5 Fiberglass	<u>7 PVC</u>	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	<u>8 Saw cut</u>	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 **220** ft. to **327** ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

GRAVEL PACK INTERVALS: From **147** ft. to **327** ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

6 GROUT MATERIAL: 1 Neat cement      2 Cement grout      3 Bentonite      4 Other \_\_\_\_\_

Grout Intervals: From **0** ft. to **10** 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	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? **Northeast of water well** How many feet? **200'**

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	2	surface			
2	5	sandy clay			
5	22	clay			
22	36	gravel			
36	67	clay			
67	75	fine sand			
75	102	35% clay, 45% med. to large sand & 20% gravel			
102	174	caliche			
174	203	med. to large sand			
203	287	15% clay & 85% med. to large sand			
287	327	25% clay & 75% fine sand			

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 9, 1985** 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 16, 1985** under the business name of **Carlile Water Well Service, Inc.** by (signature) *Edward L. Meane*

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, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY

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