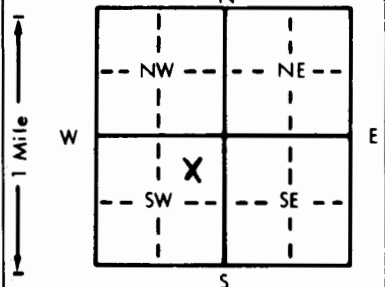


1 LOCATION OF WATER WELL: County: <b>Seward</b>	Fraction <b>1/4 C-NE 1/4 SW 1/4</b>	Section Number <b>17</b>	Township Number <b>T 34 S</b>	Range Number <b>R 34 EAM</b>
--	--	-----------------------------	----------------------------------	---------------------------------

Distance and direction from nearest town or city street address of well if located within city? **From Liberal go 5mi West on 2nd street road 3mi North 1mi West 1/2mi North East to location.**

2 WATER WELL OWNER: <b>Suzanna Goddard</b>	<b>Oil Company: Anadarko Production</b>
RR#, St. Address, Box #: <b>19719 Rice Lake Lane</b>	Board of Agriculture, Division of Water Resources
City, State, ZIP Code: <b>Houston, Texas</b>	Application Number: <b>T 82-445</b>

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



4 DEPTH OF COMPLETED WELL: **280** ft. ELEVATION: \_\_\_\_\_

Depth(s) Groundwater Encountered 1. **160** ft. 2. \_\_\_\_\_ ft. 3. \_\_\_\_\_ ft.

WELL'S STATIC WATER LEVEL **120** ft. below land surface measured on mo/day/yr **8/26/82**

Pump test data: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm

Est. Yield **60** gpm: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm

Bore Hole Diameter **9** in. to **280** 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>
2 Irrigation	4 Industrial	9 Dewatering
	7 Lawn and garden only	12 Other (Specify below)
	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)	6 Asbestos-Cement	9 Other (specify below)	CASING JOINTS: <u>Glued</u>	Clamped _____
2 <u>PVC</u>	4 ABS	7 Fiberglass		Welded _____	Threaded _____

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

Casing height above land surface **28** in., weight **2.78** lbs./ft. Wall thickness or gauge No. **256**

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)	10 Asbestos-cement
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS	11 Other (specify) _____
				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 **200** ft. to **280** ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

GRAVEL PACK INTERVALS: From **100** ft. to **280** 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	<u>15 Oil well/Gas well</u>
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? **100'**

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	2	surface			
2	30	sandy clay			
30	43	clay			
43	85	sandy clay			
85	152	clay			
152	198	sandy clay			
198	280	medium to large 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 26, 1982** 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 31, 1982** under the business name of **Carlile Water Well Service, Inc.** by (signature) *Edward E. Means*

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.