

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: Stevens		NE 1/4 NE 1/4 SE 1/4	15	T 34 S	R 35 E/W
Distance and direction from nearest town or city street address of well if located within city? From Liberal go North to Tucker Road 10mi West 1 1/2mi North west into location.					
2 WATER WELL OWNER: Cities Service					
RR#, St. Address, Box # : 3545 N.W. 58th			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : Oklahoma City, Oklahoma 73112			Application Number: T 85-536		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: 400 ft. ELEVATION:			
<div style="text-align: center;"><p>1 Mile</p></div>		Depth(s) Groundwater Encountered 1. 213 ft. 2. _____ ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL 187 ft. below land surface measured on mo/day/yr 6/18/85 .			
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Est. Yield 75 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Bore Hole Diameter 9 in. to 400 ft., and _____ in. to _____ ft.			
WELL WATER TO BE USED AS:					
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 _____					
<u>2 PVC</u> 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____					
7 Fiberglass Threaded _____					
Blank casing diameter 5 in. to 280 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 280 ft. to 400 ft., From _____ ft. to _____ ft.					
From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From 220 ft. to 400 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 How many feet? 150'					
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	2	surface			
2	43	sandy clay			
43	66	clay			
66	73	gravel			
73	104	clay			
104	132	gravel			
132	183	65% clay & 35% gravel			
183	221	20% clay & 80% sandstone			
221	248	clay			
248	316	sandy clay			
316	363	fine sand with med. to large sand			
363	400	30% clay, 50% fine sand and 20% med. 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) June 18, 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) June 28, 1985 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, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.					