

PERMIT #T78-192

USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

CWW Inv. #15170

Smith #1

1. Location of well:	County Meade	Fraction X⁴ C-W^{1/2}	Section number 9	Township number T 35S S R 26W E/W	Range number
2. Distance and direction from nearest town or city: Go East of Meade 1k. on Englewood Rd to End of Blacktop then 2m East - 2m South to location.			3. Owner of well: Leede Oil & Gas, Inc. R.R. or street: 516 Building of the Southwest City, state, zip code: Midland, Texas 79701		
4. Locate with "X" in section below: 			6. Bore hole dia. 9 in. Completion date 11-3-78 Well depth 50 ft.		
5. Type and color of material			7. <input type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary		
Surface			8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input checked="" type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> Lawn <input checked="" type="checkbox"/> Oil field water <input type="checkbox"/> Other		
Gravel & Redbed			9. Casing: Material _____ Height: Above or below Threaded _____ Welded _____ Surface 28 in. RMP _____ PVC <input checked="" type="checkbox"/> Weight 2.78 lbs./ft. Dia. 5 in. to 15 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 265		
			10. Screen: Manufacturer's name _____ Sawed perf. Type PVC Dia. 5" Slot/gauze _____ Length 35' Set between 15 ft. and 50 ft. _____ ft. and _____ ft. Gravel pack? yes Size range of material 1/8-3/16		
			11. Static water level: _____ mo./day/yr. 5 ft. below land surface Date 11/3/78		
			12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 100 g.p.m.		
			13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
			14. Well head completion: <input type="checkbox"/> Pitless adapter 28 Inches above grade		
			15. Well grouted? yes With: <input checked="" type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From 0 ft. to 10 ft.		
			16. Nearest source of possible contamination: ft. 100 Direction NE Type oilwell Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
			17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.p.m. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other		
			20. Water well contractor's certification: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. Carlile Water Well Service 118 Business name License No. _____ Address Box AA, Liberal, Kansas Signed Edward E. Means Date 11-9-78 Authorized representative		
18. Elevation: 2132	19. Remarks: 2132 2179				

35-260-9-1/4-1/4-1/4-1/4 CWS

Forward the white, blue and pink copies to the Department of Health and Environment

Form WWC-5