				F 1484/0	-D 14	/O.A. O.O /		D NG			MV	
V	ATER WELL PL	UGGING F	RECORD	Form WWC-	5P K	(SA 82a-1	212	D NO.	<u>L</u>	***		
	LOCATION OF County:	Sewar	ď	Fraction SW 1/4		NW 1/4	Section 1			nip Number 3 <b>5S</b>	Range Nur 33	mber V
	Distance and d 343 E. Pancak			own or city stre	eet addres	s of well i	f located v	vithin city	?			
<u> </u>	WATER WELL OWNER: Madden Oil Co.						Global Po digits)	sitioning	System	(decimal de	grees, min. o	f 4
	RR#, St. Address, Box #: PO Box 148						Latitude: Longitude: Elevation:					
	City, State, ZIP Code: Liberal, KS 67905						Datum:		lethod:			
	MARK WELL'S	S LOCATIO	N	4 DEPT	H OF WE	LL _	161.1	ft.			······	
	WITH AN "X" IN SECTION BOX:			WELL	'S STATIO	 WATER	LEVEL		Dry	, ft		
			_	WELL	WAS US	ED AS:		<del></del>				
	i	N NE		1 Do	mestic	5 P	ublic Wate	r Supply		9 Dewater	ing	
	W X E				2 Irrigation 6 Oil Field Water Supply					10 Monitoring		
				II	edlot Iustrial		omestic (L		arden)	11 Injection	Well	
	si	N SE		4 100	iustriai	lo W	ir Conditio	ning		12 Other		
				Was	a chemica	al/bacterio	logical sa	mple sub	mitted to	Department?	Yes N	lo X
<u> </u>	TYPE OF BLA	MK CVSIN S	G LISED:	<u> </u>					<del>.</del>			
_		3 RMP (SR		Vrought	7 F	iberglass		9 Oth	ner (Spec	ify below)		
	2 PVC	4 ABS	6 <i>F</i>	Asbestos-Ceme	ent 8 C	oncrete T	ïle					
	Blank casing d	iameter	4in. '	Was casing pu	lled? Yes	No	X If ye	s, how m	uch			
	Casing height	above or b	elow land s	surface 3	6 in							
;	GROUT PLUG	MATERIA	L: 1 N	Neat cement	2 Cem	ent grout	3 B	entonite	•	4 Other		
	Grout Plug Inte	ervals: Fr	om 0.5	ft. to 1	61.1 ft.,	From	ft.	to	ft.,	From	to	ft.
	What is the nearest source of possible contamination:											
						1 Fuel Storage 16 Other (specify below) 2 Fertilizer storage						
	3 Watertight sewer lines 8 Sewage lagoo					ticide sto				· · · · · · · · · · · · · · · · · · ·		
	4 Lateral lines		9 Feedy			doned wa			n from w	ell?		
	5 Cess pool		10 Lives	stock pens	15 Oil w	ell/Gas w	Bil	How ma	ny feet?			
		ТО	PLUG	GING MATERI	ALS	FRO	OM T	0	PL	UGGING MA	TERIALS	
	0.5	01.1		ement Grout					-			
										· · · · · · · · · · · · · · · · · · ·		
										27-27-A-visor - A-visor A-visor	<u></u>	
	L					<u> </u>			<del></del>			

by (signature)

INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records. Visit us at http://www.kdheks.gov/waterwell.

Geotechnical Services, Inc.

business name

of