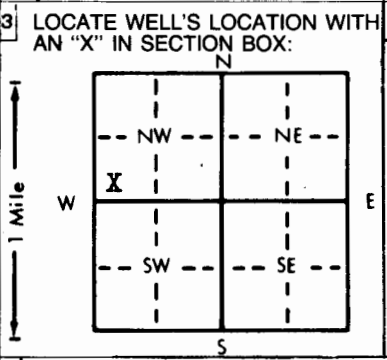


1 LOCATION OF WATER WELL: County: <b>Seward</b>	Fraction <b>SW 1/4 SW 1/4 NW 1/4</b>	Section Number <b>15</b>	Township Number <b>T 35 S</b>	Range Number <b>R 33 EW</b>
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Distance and direction from nearest town or city street address of well if located within city?  
**1/4 Mile Southwest of Liberal, Ks.**

2 WATER WELL OWNER: RR#, St. Address, Box # : City, State, ZIP Code :	<b>Slawson Drilling Co. Box 1131 Great Bend, Kansas 67530</b>	<b>SCHNEIDER E #2</b> Board of Agriculture, Division of Water Resources Application Number: <b>----</b>
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4 DEPTH OF COMPLETED WELL: <b>305</b> ft. ELEVATION: <b>Upland</b>
Depth(s) Groundwater Encountered 1. <b>180</b> ft. 2. <b>200</b> ft. 3. _____ ft.
WELL'S STATIC WATER LEVEL <b>118</b> ft. below land surface measured on mo/day/yr <b>Nov. 30, 1982</b>
Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
Est. Yield <b>50-60</b> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
Bore Hole Diameter <b>9 7/8</b> in. to <b>305</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 <b>XXX</b> Oil field water supply 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 <b>XX</b> ; If yes, mo/day/yr sample was submitted
Water Well Disinfected? Yes <b>XX</b> No

5 TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued <b>XX</b> Clamped _____
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)
<b>XX</b> PVC	4 ABS	7 Fiberglass	Welded _____
Blank casing diameter <b>5</b> in. to <b>265</b> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.			Threaded _____
Casing height above land surface <b>12</b> in., weight <b>2.8</b> lbs./ft. Wall thickness or gauge No. <b>265</b>			
TYPE OF SCREEN OR PERFORATION MATERIAL:	<b>XX</b> PVC	10 Asbestos-cement	
1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS
11 Other (specify) _____			12 None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE:	5 Gauzed wrapped	<b>XXX</b> Saw cut	11 None (open hole)
1 Continuous slot	3 Mill slot	6 Wire wrapped	9 Drilled holes
2 Louvered shutter	4 Key punched	7 Torch cut	10 Other (specify) _____
SCREEN-PERFORATED INTERVALS: From <b>265</b> ft. to <b>305</b> ft., From _____ ft. to _____ ft.			
GRAVEL PACK INTERVALS: From <b>14</b> ft. to <b>305</b> ft., From _____ ft. to _____ ft.			

6 GROUT MATERIAL: <b>XX</b> Neat cement	2 Cement grout	3 Bentonite	4 Other _____
Grout Intervals: From <b>4</b> ft. to <b>14</b> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.			
What is the nearest source of possible contamination:	10 Livestock pens	14 Abandoned water well	
1 Septic tank	4 Lateral lines	7 Pit privy	11 Fuel storage
2 Sewer lines	5 Cess pool	8 Sewage lagoon	<b>XX</b> <del>Oil</del> Gas well
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage
			13 Insecticide storage
16 Other (specify below)			
Direction from well? <b>Southwest</b>	How many feet? <b>75</b>		

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	4	Topsoil			
4	10	Fine Sand			
10	30	Sandy Clay			
30	45	Fine Sand			
45	50	Clay			
50	60	Sandy Clay			
60	65	Clay			
65	70	Fine Sand			
70	78	Sandy Clay			
78	95	Fine Sand			
95	180	Clay			
180	200	Sandy Clay, Loose			
200	360	Very Very 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) <b>Nov. 30, 1982</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>252</b> This Water Well Record was completed on (mo/day/year) <b>December 8, 1982</b> under the business name of <b>Friesen Windmill &amp; Supply Inc.</b> by (signature) <i>[Signature]</i>
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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  
T 35  
R 33  
SEC 15  
SW 1/4 SW 1/4 NW 1/4