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Kansas State Dept. Of Health  
(Water Well Contractors)  
Forbes-Bldg. 740  
Topeka, Kansas 66620

1 Location of well:	County <b>Stevens</b>	Township name	Fraction <b>NE NE</b>	Section number <b>17</b>	Town number <b>35S</b>	Range number <b>35W</b>
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3 Owner of well: **Rains & Williamson Oil Co., Inc.**  
Address: **435 Page Court, 220 West Douglas  
Wichita, Kansas 67202**

Locust Top 2 Wnt 9 Wnt 1 south LIBERAL

4 Well depth: 220 ft. Date of completion 7-8-75  
Well diameter 10 in.

5 ☐ Cable tool ☒ Rotary ☐ Driven ☐ Dug  
☐ Hollow rod ☐ Jetted ☐ Bored ☐ Reverse rotary

6 Use: ☐ Domestic ☐ Public supply ☒ Industry  
☐ Irrigation ☐ Air conditioning ☐ Commercial  
☐ Test well ☐ **Oil Rig**

7 Casing: Material PVC Height: above/below  
Threaded ☐ Welded ☐ Surface 28 in.  
Diam. Weight 2.78 lbs./ft.       
5 in. to 170 ft. depth Drive shoe? ☐ Yes ☒ No  
5 in. to 220 ft. depth

2	Type and color of material
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From	To
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## Surface

## Sandy Clay

**Medium to Large Sand**

Clay & Medium to large sand

Medium to large sand

Clay and Medium to large sand

8 Screen: sawed perf.  
 Manufacturer \_\_\_\_\_  
 Type PVC Dia. 5  
 Slot/gauze 0.030 Length 40  
 Set between 170 ft. and 210 ft.  
 Fittings: 1/8 - 3/16  
 Gravel pack ☒ Yes ☐ No Size range of material \_\_\_\_\_

9 Static water level: 100 ft. below land surface Date 7-8-75


10 Pumping level below land surfaces:  
 \_\_\_\_\_ ft. after \_\_\_\_\_ hrs. pumping \_\_\_\_\_ g.p.m.  
 \_\_\_\_\_ ft. after \_\_\_\_\_ hrs. pumping \_\_\_\_\_ g.p.m.  
 Estimated maximum yield 50 g.p.m.

11 Water sample submitted:  
☐ Yes ☒ No Date \_\_\_\_\_

12 Well head completion:  
☐ Pitless adapter **28** inches above grade

Well grouted? ☒ Yes ☐ No  
☒ Neat cement ☐ Bentonite ☐ \_\_\_\_\_  
 Depth: From 0 ft. to 10 ft.

14 Nearest source of possible contamination:  
ft. 100 Direction SW Type Oil  
Well disinfected upon completion? ☒ Yes ☐ No

15 Pump:  Not installed

Manufacturer's name \_\_\_\_\_

Model number \_\_\_\_\_ HP \_\_\_\_\_ Volts \_\_\_\_\_

Length of drop pipe \_\_\_\_\_ ft. capacity \_\_\_\_\_ g.m.p.

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

16 Remarks: elevation

**Topography:**

☐ Hill  
☐ Slope  
☒ Upland  
☐ Valley

17 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 118  
Business name License No.  
Address Box 275, Liberal, Kansas  
Signed [Signature] Date 7-17  
Authorized representative

35 350 17 NE NE