

Free Press Viewpoint

Oil drilling needs research, planning

When the ultra-liberal Obama administration advocates opening up whole new oceans to offshore drilling, you know we need the oil.

So what do we do now? Good question.

The Gulf spill, already big, will get bigger before oil-company officials find a way to shut it off. The gusher, which killed 11 and eventually sank the drill rig Deepwater Horizon, is pouring around 5,000 barrels of crude oil a day into the Gulf of Mexico.

As oil disasters go, it's big, maybe as big as the Exxon Valdez grounding in Alaska in the 1980s. Coastal towns and fishermen say they're still dealing with the effects of that spill.

But apparently it could be much bigger. British Petroleum officials estimate the well's total flow at 40,000 to 60,000 barrels per day. The company thinks the blowout preventer, a valve designed to shut down an out-of-control well, may be working, just leaking a little. At 50,000, the spill would be 10 times bigger than it already is.

At the current rate, it will take nearly two months to equal the size of the Exxon spill, and experts still expect to have it shut down by then. The company has been using remote-control submarines to try to shut valves, tweak equipment and control the well at the wellhead, 5,000 feet under the surface.

The firm tried to lower a containment dome over the well over the weekend, but it's another world down there, literally. It's dark, cold and the pressure is enormous. Natural gas turns to slush under those conditions, or worse yet, combines with water to form a kind of ice.

It was the hydrate crystals formed by the gas that gummed up the dome, keeping it from working. Slushy gas, expanding as it rose up the pipe, blew out the well and destroyed the drill platform.

The company has another dome ready to go and might shoot junk, ground up tires and the like, into the blowout preventer to jam the valve. Maybe one of its plans will work.

So right now, there's no thought of "Drill, baby, drill," despite what the administration was saying just a few weeks ago about expanded offshore drilling.

British Petroleum - the firm's U.S. operations used to be Amoco, or American Oil Company, originally was Standard Oil Co. of Indiana - already is paying claims for loss of income along the Gulf, but thousands more will come in. It's an economic and ecological disaster.

But what for the future?

We still need more oil, no matter what. We'll have to open up those drilling areas. But first we need to understand what happened on the Deepwater Horizon and why the blowout occurred. We need to know how to change drilling methods to prevent a repeat.

We need to study rig safety and formulate techniques to deal more quickly with the next blowout. We need to understand the special problems and issues of drilling in ever-deeper water. In short, we need to learn a lot.

Drill, baby, drill? Not so fast. First we have issues to work out.

But we still need oil. Even the president agrees.

- Steve Haynes

We encourage comments on opinions expressed on this page. Mail them to the Colby Free Press, 155 W. Fifth St., Colby, Kan., 67701, or e-mail colby.editor@nwkansas.com.

COLBY FREE PRESS

155 W. Fifth St. (USPS 120-920) (785) 462-3963
Colby, Kan. 67701 fax (785) 462-7749

Send news to: colby.editor@nwkansas.com

State award-winning newspaper, General Excellence, Design & Layout, Columns, Editorial Writing, Sports Columns, News, Photography. Official newspaper of Thomas County, Colby, Brewster and Rexford.

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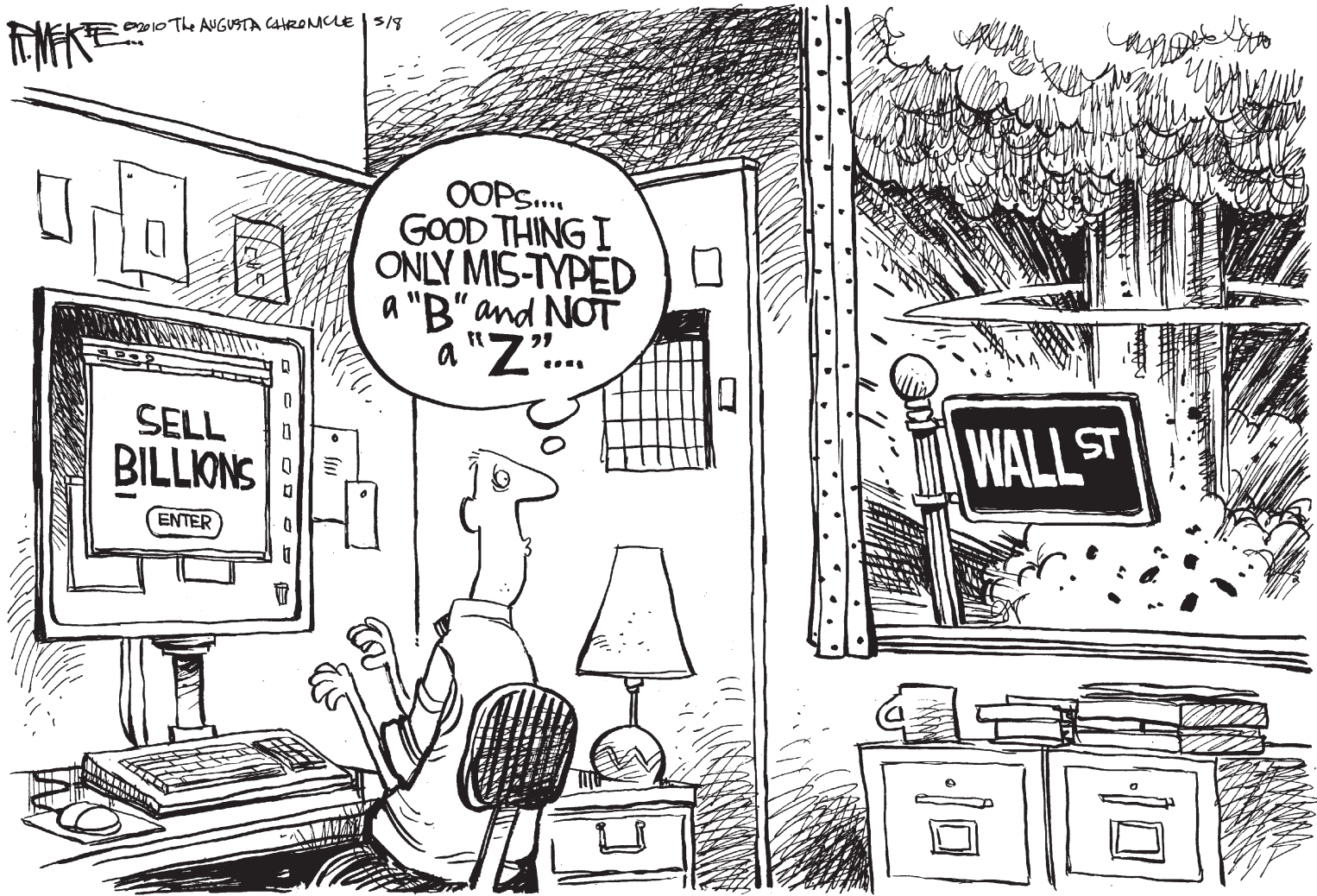
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THE COLBY FREE PRESS (USPS 120-920) is published every Monday, Wednesday, Thursday and Friday, except the days observed for Memorial Day, Independence Day, Labor Day, Thanksgiving Day, Christmas Day and New Year's Day, by Nor'West Newspaper, 155 W. Fifth St., Colby, Kan., 67701.

PERIODICALS POSTAGE paid at Colby, Kan. 67701, and at additional mailing offices. POSTMASTER: Send address changes to Colby Free Press, 155 W. Fifth St., Colby, Kan., 67701.

THE BUSINESS OFFICE at 155 W. Fifth is open from 8 a.m. to 6 p.m. Monday to Friday, closed Saturday and Sunday. MEMBER OF THE ASSOCIATED PRESS, which is exclusively entitled to the use for publication of all news herein. Member Kansas Press Association and National Newspaper Association.

SUBSCRIPTION RATES: In Colby, Thomas County and Oakley: three months \$35, one year \$85. By mail to ZIP Codes beginning with 676 and 677: three months \$39, one year \$95. Elsewhere in the U.S., mailed once per week: three months \$39, one year \$95. Student rate, nine months, in Colby, Thomas County and Oakley, \$64; mailed once per week elsewhere in the U.S. \$72



Flu threat remains after a year

One year ago, the world suddenly woke up to a new threat: A novel flu virus had arrived on the scene.

It was a virus the world had never seen before, one that eventually would later be called H1N1.

At first there were more questions than answers: How serious was the disease this new virus was causing? How fast would it spread among people? Was it treatable with drugs? Could a vaccine be developed to stop it?

The earliest reports said the virus was responsible for widespread disease in Mexico. Laboratory-confirmed cases had also turned up in California and Texas.

And then, just a day after we first heard about the virus, the first American cases away from the border were found right here in Kansas.

A Dickinson County man who had visited Mexico on a business trip returned home ill and infected his wife before both went to see their astute family physician. Analysis of the specimens the physician collected, performed that evening by the state public health laboratory, pointed to the mysterious new virus.

Within hours, under the dark of night, the specimens were sent aboard the governor's airplane to the laboratories of the federal Centers for Disease Control and Prevention in Atlanta for confirmation.

Sure enough, both cases were positive. Now Kansas found itself on the front lines of a potentially dangerous epidemic.

Within days, other cases appeared around the country. In some places, schools suspended their classes, giving thousands of students an unplanned vacation. In other towns, emergency rooms were flooded with fearful patients. Several countries closed their borders to people arriving from America. Face masks flew off of pharmacy shelves.

And across the country, millions of people started to take hand washing and "cough etiquette" seriously for the first time.

All this time, actual cases of the new flu were rare. But talk about the emerging pandemic

Other Opinions

Jason Eberhart-Phillips
Kansas State Health Officer

was everywhere, from cable newsrooms to the halls of Congress to kitchen tables around the country.

A year later, most of the talk about H1N1 flu has disappeared.

Although the virus remains present in every state, and is likely to kill thousands of Americans in the coming flu season, most Americans no longer give serious thought to H1N1 influenza. For many, the so-called "swine flu" episode of 2009 was just another over-hyped, sky-is-falling case of media-fed scare-mongering in the tradition of Y2K and killer bees.

That's unfortunate, because now is a good time to take stock of what we have learned about H1N1 flu in the past year, and start to prepare for the unpredictable - but inevitable - next chapter in humanity's ongoing coexistence with this new virus.

Here are some key points to consider:

1. Most Americans remain susceptible to H1N1 flu. Of the 309 million residents of the United States, about 60 million were naturally infected during the past year and 75 million got the vaccine (some of whom may also have been infected). That leaves at least 174 million, or 56 percent of the population, still vulnerable.

2. Influenza viruses typically mutate from year to year. Although the H1N1 virus has been relatively stable so far, we can expect it to change over time. This means that people who were infected and/or immunized in the past flu season may become susceptible to it again. Everyone will need to get the new flu vaccine coming in the fall, with repeat doses

every year after that.

3. So far the vast majority of disease from the H1N1 virus has been mild, but that could change. Overall, this pandemic has been about 100 times less lethal than the severe 1918 pandemic that forms the backdrop of public health planning for flu outbreaks. But minor shifts in the virus' genetic make-up - or an unholy alliance of H1N1 with a more lethal flu virus from the animal world - could create a very different clinical picture in the future.

The virus has already shown it can kill more than 12,000 Americans and has put 270,000 others in the hospital, including many young people who are not normally sickened as seriously with the flu.

4. Influenza vaccines work and are very safe. Although production difficulties prevented full deployment of the H1N1 flu vaccine as rapidly as first hoped, the brisk uptake of the vaccine in every city nationwide dampened the explosive growth of the epidemic during the fall of 2009 and is likely to have prevented another pandemic wave during the winter months of 2010.

Careful surveillance of adverse health events associated in time with vaccination has demonstrated an exemplary safety profile, despite fears among some people that the vaccine had been "rushed" to market.

No one is talking about it anymore, but the H1N1 flu pandemic isn't over. Flu activity is thankfully low at the moment, but nearly every day, new cases are still being identified in Kansas.

It's a safe bet that case numbers will rebound sooner or later. Will you be ready?

Dr. Eberhart-Phillips is the Kansas state health officer and director of health in the Kansas Department of Health and Environment. He can be reached at jeberhart-phillips@kdheks.gov. Previous columns are now available online at Dr. Jason's Blog, www.kdheks.gov/blogs/dr_jasons_blogs.htm.

Invest in the future in higher education

To the Editor:

Kansas colleges and universities have taken more than \$100 million in budget cuts since the start of the state budget crisis.

Instructor layoffs and the elimination of teaching positions have resulted in the elimination of more than 450 academic programs and classes. We've found efficiencies wherever possible, but these cuts have real effects on students and on the businesses that rely on Kansas colleges for educated workers.

But this column isn't about the past; it's about the future.

It's about the future we can create for this state if the Legislature makes the investment in higher education Kansans know is needed to ensure the long-term prosperity of our state - an investment they are willing to pay for.

Each year, our institutions enroll more than 125,000 students. These students come to us because they know the power of higher education to dramatically increase lifetime earnings and open doors to success.

When these students graduate, they go on to work in virtually every industry in Kansas. Businesses rely on us to provide the education employees need to prosper. They also rely on us for the new technologies and discoveries



Free Press Letter Drop

• Our readers sound off

that create new industries and enhance our state's quality of life.

If we sustain further cuts, our enrollment capacity and class offerings will continue to be constricted. Students will face limited opportunities and businesses will have to go elsewhere for talented employees. Kansas' long-term prosperity will be threatened.

IF is going to be ready for economic recovery, we must continue our investment in the education and research that maintains our competitiveness nationally and internationally.

We encourage legislators to make that commitment - even if it requires new revenue - because it will pay lasting dividends for Kansas students, families and businesses.

Jill Docking, chair, Kansas Board of Regents.

Michael Lane, president, Emporia State. Ed Hammond, president, Fort Hays State. Kirk Schulz, president, Kansas State. Steve Scott, president, Pittsburg State. Bernadette Gray-Little, chancellor, University of Kansas.

Jerry Farley, president, Washburn. Donald Beggs, president, Wichita State. Thomas Burke, president, Kansas Community College Council of Presidents.

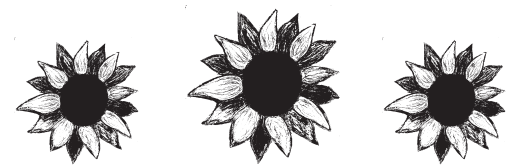
Dean Hollenbeck, president, Kansas Association of Technical Colleges.

'Smoke free' cheers

To the Editor:

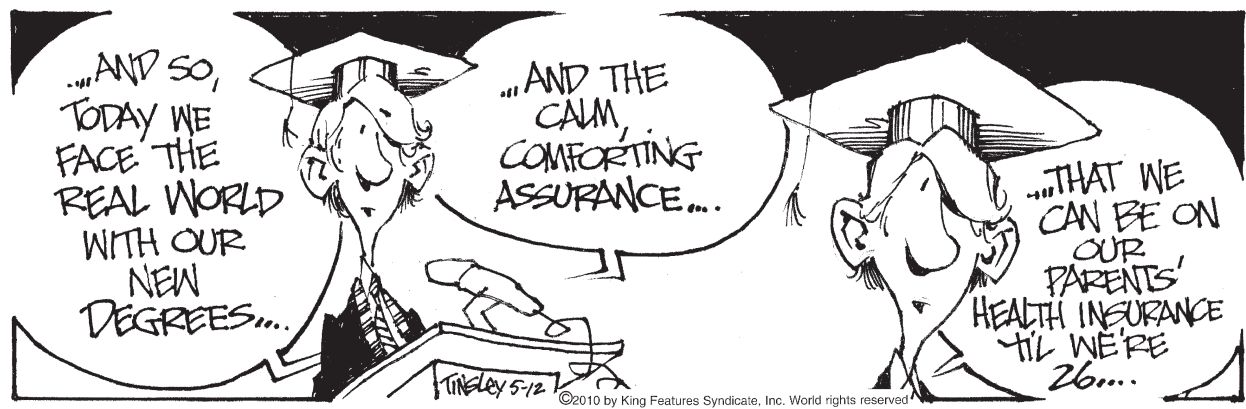
Just wanted to say when I saw the sign at Colby Bowl - "Smoke free beginning June 1" - I said YAHOO!! Thanks Colby Bowl.

Dinah Charles Colby



Mallard Fillmore

• Bruce Tinsley



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