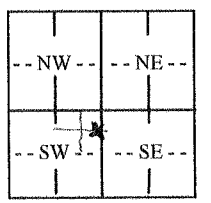


WATER WELL RECORD

Form WWC-5

Division of Water Resources App. No.

1 LOCATION OF WATER WELL: County: Miami	Fraction <i>SE 1/4 NE 1/4 N6 1/2 L 1/4</i>	Section Number 33	Township No. T 17 S	Range Number R 24 E <input type="checkbox"/> W
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input checked="" type="checkbox"/> .		Global Positioning System (GPS) information: Latitude: (in decimal degrees) Longitude: (in decimal degrees) Elevation: Datum: <input type="checkbox"/> WGS 84, <input type="checkbox"/> NAD 83, <input type="checkbox"/> NAD 27 Collection Method: <input type="checkbox"/> GPS unit (Make/Model:) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> <3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> >15 m		
2 WATER WELL OWNER: BOB & LYNN FOGLE RR#, Street Address, Box #: 15192 W. 335th City, State, ZIP Code : PAOLA, KANSAS 66071				

3 LOCATE WELL WITH AN "X" IN SECTION BOX: N  S ----- 1 mile -----	4 DEPTH OF COMPLETED WELL 400 ft. <i>3-400' Bores</i> Depth(s) Groundwater Encountered (1).....0..... ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL.....0..... ft. below land surface measured on mo/day/yr..... Pump test data: Well water was.....ft. after..... hours pumping..... gpm EST. YIELD...0.....gpm. Well water was.....ft. after..... hours pumping..... gpm Bore Hole Diameter ...6.....in. to ...400.....ft., andin. toft. WELL WATER TO BE USED AS: <input type="checkbox"/> Public water supply <input checked="" type="checkbox"/> Geothermal <input type="checkbox"/> Injection well <input type="checkbox"/> Domestic <input type="checkbox"/> Feedlot <input type="checkbox"/> Oil field water supply <input type="checkbox"/> Dewatering <input type="checkbox"/> Other (Specify below) <input type="checkbox"/> Irrigation <input type="checkbox"/> Industrial <input type="checkbox"/> Domestic-lawn & garden <input type="checkbox"/> Monitoring well CLOSED LOOP Was a chemical/bacteriological sample submitted to Department? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, mo/day/yr sample was submitted..... Water well disinfected? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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5 TYPE OF CASING USED: Steel PVC Other **H.D. POLYETHYLENE**.....
CASING JOINTS: Glued Clamped Welded Threaded *Fusion*
 Casing diameter in. to ft., Diameter in. to ft., Diameter in. to ft.
 Casing height above land surface..... in., Weightlbs./ft., Wall thickness or gauge No.
TYPE OF SCREEN OR PERFORATION MATERIAL: *None*
 Steel Stainless Steel PVC Other (Specify)
 Brass Galvanized Steel None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE: *None*
 Continuous slot Mill slot Gauze wrapped Torch cut Drilled holes None (open hole)
 Louvered shutter Key punched Wire wrapped Saw cut Other (specify)
SCREEN-PERFORATED INTERVALS: From..... ft. to ft., From ft. to ft.
 From..... ft. to ft., From ft. to ft.
GRAVEL PACK INTERVALS: From..... ft. to ft., From ft. to ft.
 From..... ft. to ft., From ft. to ft.

6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other
Grout Intervals: From 400..... ft. to 240..... ft., From 240..... ft. to 190..... ft., From 190..... ft. to 3.....ft.
What is the nearest source of possible contamination:
 Septic tank Lateral lines Pit privy Livestock pens Insecticide storage Other (specify below)
 Sewer lines Cesspool Sewage lagoon Fuel storage Abandoned water well
 Watertight sewer lines Seepage pit Feedyard Fertilizer storage Oil well/gas well
 Direction from well Distance from well

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	8	SOIL/CLAY			
		176-180 SHALE			
8	16	SANDSTONE			
		180-205 LIME			
16	30	SHALE			
		205-209 SHALE			
30	43	LIME			
		209-215 LIME			
43	62	SHALE	400	240	Bentonite Grout
		215-217 SHALE			
62	76	LIME	240	190	Cement Grout
		217-221 LIME			
76	126	SHALE	190	3	Bentonite Grout
		221-235 SHALE			
126	130	LIME			
		235-240 SANDSTONE			
130	146	SHALE			
		240-400 SHALE			
146	176	LIME			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo/day/year) *5-12-14*... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. *561*..... This Water Well Record was completed on (mo/day/year) *5-20-14*..... under the business name of **EVANS ENERGY DEVELOPMENT, INC.**..... by (signature) *[Signature]*

INSTRUCTIONS: Use typewriter or ball point pen. *PLEASE PRESS FIRMLY* and *PRINT* clearly. Please fill in blanks and check the correct answers. Send one copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at <http://www.kdheks.gov/waterwell/index.html>