RR#, Steet Address, Box #: 2 North Nevada City, Start, ZIP Code Ci	<b>V</b>	TED WA	TII DECODD	Form V	WWC.5			W-124	Io	
Street/Rural Address of Well Location, if unknown, distance & direction from nearest town or intersection: if at owner's address, check here	1 L	OCATIO	N OF WATER WELL:				ction_Number	Township No.	Range Number	
Elovation	St	reet/Rural	Address of Well Location:			Glo	hal Positioning	System (GPS) ii	nformation:	
Elovation							Latitude: .37			
Elorado, KS  WATER WELL OWNER: El Paso Corporation RR8, Street Address, Box #: 2 North Nevada City, State, ZIP Code City, State, ZIP					Lo	Longitude: 96. 3 5.559 (in decimal degrees)				
2 WATER WELL OWNER: El Paso Corporation RR#, Street Address, Dox #: 2 North Nevada City, State, ZIP Code : 2 North Nevada City, State,					Ele	Elevation:				
RR#, Stored Address, Box #: 2 North Nevada City, State, Z1P Code	2 W	ATER V	VELLOWNER: FI Paso	Corporation	Col	Collection Method:				
Stock	R	R#, Street Address, Box #: 2 North Nevada					GPS unit (Make/Model: Garmin 60			
SUCREMOR PORT   SECTION BOX:   No	C						Digital Map/Ph	oto, Topographi	c Map, Land Survey	
WITH AN X* IN SECTION BOX SECTION SECT	2 Y OCATE WENT									
NN	W	WITH AN "X" IN 4 DEPTH OF COMPLETED WELL.								
NN	SE		OX: Depth(s) Ground	lwater Encountered	(1)	<del></del> 1	ft. (2). <del></del>	ft. (	3)	
STYPEOF CASING USED:   Steel   Glamped   Geothermal   Injection well   Growth   Gr		1	WELL'S STATIC WATER LEVEL							
Bore Hole Diameter . M in. to			DOT VIDED	gnm_Well wat	er was		ft after	hours puni	ninggpm	
WELL WATER TO BE USED AS:   Dublic water supply   Geothermal   Injection well   Domestic   Feedlot   Oil field water supply   Dewatering   Other (Specify below)   Irrigation   Industrial   Domestic-lawn & garden   Monitoring well   Was a chemical/bacteriological sample submitted to Department?   Yes   No   If yes, mo/day/yr sample was submitted.   Yes   No   If yes, mo/day/yr sample was submitted.   Yes   No   If yes, mo/day/yr sample was submitted.   Yes   No   No   No   No   No   No   No   N	w	NW								
Irrigation	-	+	→   WELL WATER	TO BE USED AS:	Public v	vater sup	ply 📙 Geo	othermal 🔲 I	njection well	
Irrigation		Domestic Feedlot Oil field water supply Dewatering Other (Specify be								
S	¶     Irrigation   Industrial   Domestic-lawn & garden M Monitoring well									
Mater well disinfected?   Yes   No										
CASING JOINTS: Glued Clamped Welded Threaded Casing diameter In. to In. Diameter In. to In. t										
CASING JOINTS:	, —									
Casing height above land surface. 39	CASING JOINTS: Glued Clamped Welded Threaded									
TYPE OF SCREEN OR PERFORATION MATERIAL:    Steel	Casing diameter .2									
Steel   Stainless Steel   PVC   Other (Specify)										
Brass   Galvanized Steel   None used (open hole)   SCREEN OR PERFORATION OPENINGS ARE:   Continuous slot   Mill slot   Gauze wrapped   Torch cut   Other (specify)   Continuous slot   Mill slot   Gauze wrapped   Saw cut   Other (specify)   Screen Perforated Intervals: From   10   ft. to   ft. From   ft.										
Continuous slot	☐ Brass ☐ Galvanized Steel ☐ None used (open hole)									
Louvered shutter   Key punched   Wire wrapped   Saw cut   Other (specify)	SCREEN OR PERFORATION OPENINGS ARE:									
From	Ucontinuous stot Mill stot Ucauze wrapped Utorch cut Uprilled holes Unone (open hole)									
From	SCREEN-PERFORATED INTERVALS: From									
From	From									
Second   S		GRAV	EL PACK INTERVALS:	From L.Q	ft. to	₹	ft., From	ft. t	o <del></del> ft.	
Industrials: From	From									
At is the nearest source of possible contamination:   Septic tank	Grout Intervals: From A to A From A to A									
Sewer lines   Gespage pit   Feedyard   Fertilizer storage   Oil well/gas well   Former Oil Refinery	What is the nearest source of possible contamination:									
Watertight sewer lines   Seepage pit   Feedyard   Fertilizer storage   Oil well/gas well   Former Oil Refinery										
Distance from well  ROM TO LITHOLOGIC LOG FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS  CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Constructed, reconstructed, or plugged ider my jurisdiction and was completed on (mo/day/year) 2.1		=		~ ~					er Oil Refinerv	
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was and constructed, or plugged determy jurisdiction and was completed on (mo/day/year)			n well	<u></u>						
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged adder my jurisdiction and was completed on (mo/day/year)	FROM	TO		CLOG	FROM	TO	LITHO. LO	G (cont.) <u>or</u> PLUC	GGING INTERVALS	
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, or plugged ider my jurisdiction and was completed on (mo/day/year)	<u>,                                    </u>	12	<u>clayey</u> Silt		ļ					
CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, or plugged and purisdiction and was completed on (mo/day/year)	<u> </u>		Clay							
der my jurisdiction and was completed on (mo/day/year)		10	HILESTONE							
der my jurisdiction and was completed on (mo/day/year)										
der my jurisdiction and was completed on (mo/day/year)										
der my jurisdiction and was completed on (mo/day/year)		<del>                                     </del>								
der my jurisdiction and was completed on (mo/day/year)							ļ	**		
der my jurisdiction and was completed on (mo/day/year)		1								
der my jurisdiction and was completed on (mo/day/year)	7 CON	TRACTO	OR'S OR LANDOWNER'S	S CERTIFICATION	: This wa	er well v	was 🚺 construc	ted, [] reconstruc	eted, or plugged	
der the business name of AET. by (signature)  STRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies hite, blue, pink) to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. lephone 785-296-5522. 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 p://www.kdheks.gov/waterwell/index.html.	under m	ıy jurisdic	tion and was completed on	(mo/day/year) 💫	. 1. 1.9Y a	nd this r	ecord is true to	the best of my kno	owledge and/belief.	
STRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks and check the correct answers. Send three copies hite, blue, pink) to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. lephone 785-296-5522. 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 p://www.kdheks.gov/waterwell/index.html.	Kansas	Water W	ell Contractor's License No.	This V ـــــــــــــــــــــــــــــــــــ	Vater Well I	Record w	as completed o	n (mo/day/year) .	+./18/11	
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	Telephone	785-296-5	522. Send one copy to WATER							
A 82a-1212 Check: W White Copy, Blue Copy, Pink Copy										