WATER WELL RECORD Form WWC-5 KSA 82a-1212 Copy-06

1 LOCATION OF WATER WELL	Fraction	Section Number	Township Number	Range Number
County: Sedgwick	NE ¼ NW ¼ NE ¼	9	T 27 S	R 1E E/W

Distance and direction from nearest town or city? N.E. Wichita, Kansas

Street address of well if located within city? 1100 E. 21st Street Well E

2 WATER WELL OWNER: Derby Refining Company
RR#, St. Address, Box # : 1100 E. 21st Street
City, State, ZIP Code : Wichita, Kansas 67214

Board of Agriculture, Division of Water Resources
Application Number:

3 DEPTH OF COMPLETED WELL 25 ft. Bore Hole Diameter 9 in. to 25 ft., and ____ in. to ____ ft.

Well Water to be used as: 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial 5 Public water supply 6 Oil field water supply 7 Lawn and garden only 8 Air conditioning 9 Dewatering X 10 Observation well 11 Injection well 12 Other (Specify below)

Well's static water level 11.5 ft. below land surface measured on 6 month 2 day 81 year

Pump Test Data: Well water was ____ ft. after ____ hours pumping ____ gpm
Est. Yield ____ gpm: Well water was ____ ft. after ____ hours pumping ____ gpm

4 TYPE OF BLANK CASING USED: 1 Steel 2 PVC X 3 RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below)

Casing Joints: Glued X Clamped Welded Threaded

Blank casing dia 6 in. to 8.0 ft., Dia ____ in. to ____ ft., Dia ____ in. to ____ ft.

Casing height above land surface 24 in., weight ____ lbs./ft. Wall thickness or gauge No 200

TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 6 Concrete tile X 7 PVC 8 RMP (SR) 9 ABS 10 Asbestos-cement 11 Other (specify) 12 None used (open hole)

Screen or Perforation Openings Are: 1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut X 8 Saw cut 9 Drilled holes 10 Other (specify) 11 None (open hole)

Screen-Perforation Dia 6 in. to 25 ft., Dia ____ in. to ____ ft., Dia ____ in to ____ ft.

Screen-Perforated Intervals: From 8.0 ft. to 25.0 ft., From ____ ft. to ____ ft.
From ____ ft. to ____ ft., From ____ ft. to ____ ft.

Gravel Pack Intervals: From 8.0 ft. to 25.0 ft., From ____ ft. to ____ ft.
From ____ ft. to ____ ft., From ____ ft. to ____ ft.

5 GROUT MATERIAL: 1 Neat cement X 2 Cement grout 3 Bentonite 4 Other

Grouted Intervals: From 0 ft. to 8.0 ft., From ____ ft. to ____ ft., From ____ ft. to ____ ft.

What is the nearest source of possible contamination: 1 Septic tank 2 Sewer lines 3 Lateral lines 4 Cess pool 5 Seepage pit 6 Pit privy 7 Sewage lagoon 8 Feed yard 9 Livestock pens 10 Fuel storage 11 Fertilizer storage 12 Insecticide storage 13 Watertight sewer lines 14 Abandoned water well 15 Oil well/Gas well X 16 Other (specify below) Hydrocarbon on H2O

Direction from well ALL How many feet 0 ? Water Well Disinfected? Yes ____ No X

Was a chemical/bacteriological sample submitted to Department? Yes ____ No X : If yes, date sample was submitted ____ month ____ day ____ year: Pump Installed? Yes ____ No X

If Yes: Pump Manufacturer's name ____ Model No. ____ HP ____ Volts ____

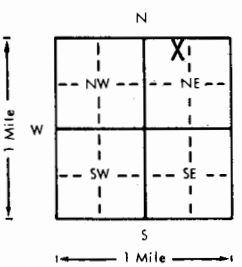
Depth of Pump Intake ____ ft. Pumps Capacity rated at ____ gal./min.

Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on 6 month 2 day 81 year, and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 415-B

This Water Well Record was completed on 12 month 10 day 81 year under the business name of DANIELS DRILLING COMPANY by (signature) David W Daniels

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



ELEVATION:

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0.0	1.0	Base Course			
1.0	14.0	Silty Clay			
14.0	17.0	Silty Sand			
17.0	25.0	Sand			

Depth(s) Groundwater Encountered 1. 11.5 ft. 2. ____ ft. 3. ____ ft. 4. ____ ft. (Use a second sheet if needed)

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, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY T 27 R 1 E/W SEC. 9 NE¼ NW¼ NE¼

MC