

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number																																																																												
County: Butler		NE ¼ SW ¼ SW ¼		27		T 27 S		R 4 E/W																																																																												
Distance and direction from nearest town or city street address of well if located within city? The well is located approximately 1,617 feet south and 1,182 feet west of W 2nd Ave and Oak Street in Augusta. Latitude N37° 40' 5.20" Longitude W96° 59' 8.69"																																																																																				
2 WATER WELL OWNER: Williams Petroleum Services, LLC																																																																																				
RR#, St. Address, Box #: PO Box 3483						Board of Agriculture, Division of Water Resources																																																																														
City, State, ZIP Code: Tulsa, Oklahoma 74101-3483						Application Number: Not Applicable																																																																														
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL																																																																																		
		35 ft. ELEVATION: _____ Depth(s) Groundwater Encountered 1 20 ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL 9.18 ft. below land surface measured on mo/day/yr 9/4/08 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm Bore Hole Diameter 8 in. to 35 ft. and _____ in. to _____ ft. WELL WATER TO BE USED AS: 1 Domestic 3 Feed lot 5 Public water supply 8 Air conditioning 11 Injection well 2 Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 7 Lawn and garden (domestic) 10 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes _____ No X If yes, mo/day/yr sample was submitted _____ Water Well Disinfected? Yes _____ No _____																																																																																		
		5 TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____ 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) _____ Welded _____ 7 Fiberglass _____ Threaded _____ Blank casing diameter 2 in. to 35 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Casing height above land surface 26.4 in., weight 0.682 lbs./ft. Wall thickness or gauge No. 0.1875 in.																																																																																		
		TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify) _____ 12 None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes 7 Torch cut 10 Other (specify) _____ SCREEN-PERFORATED INTERVALS: From 30 ft. to 35 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From 28 ft. to 35 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.																																																																																		
		6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____ Grout Intervals From 0 ft. to 28 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. What is the nearest source of possible contamination: 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/ Gas well 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below) API separator 13 Insecticide storage Direction from well? NW How many feet? approximately 40																																																																																		
		<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>CODE</th> <th>LITHOLOGIC LOG</th> <th>FROM</th> <th>TO</th> <th>PLUGGING INTERVALS</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>15</td> <td>01</td> <td>Dark gray to brown, fat clay</td> <td></td> <td></td> <td></td> </tr> <tr> <td>15</td> <td>30</td> <td>03</td> <td>Gray, silty, lean clay</td> <td></td> <td></td> <td></td> </tr> <tr> <td>30</td> <td>35</td> <td>17</td> <td>Sand and gravel</td> <td></td> <td></td> <td></td> </tr> <tr> <td>35</td> <td>35</td> <td>20</td> <td>Fossiliferous, cherty limestone</td> <td></td> <td></td> <td></td> </tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>								FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	0	15	01	Dark gray to brown, fat clay				15	30	03	Gray, silty, lean clay				30	35	17	Sand and gravel				35	35	20	Fossiliferous, cherty limestone																																											
FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS																																																																														
0	15	01	Dark gray to brown, fat clay																																																																																	
15	30	03	Gray, silty, lean clay																																																																																	
30	35	17	Sand and gravel																																																																																	
35	35	20	Fossiliferous, cherty limestone																																																																																	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/yr) 8/12/08 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 616 This Water Well Record was completed on (mo/day/yr) 3/18/09 under the business name of Thiele Geotech, Inc. by (signature) <i>[Signature]</i> INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.																																																																																				

OFFICE USE ONLY

T

R

SEC