

|                           |  |                                     |                |                 |                |
|---------------------------|--|-------------------------------------|----------------|-----------------|----------------|
| 1 LOCATION OF WATER WELL: |  | Fraction                            | Section Number | Township Number | Range Number   |
| County: <b>Butler</b>     |  | <b>SE</b> ¼ <b>SW</b> ¼ <b>NE</b> ¼ | <b>28</b>      | <b>T 27 S</b>   | <b>R 4 E/W</b> |

Distance and direction from nearest town or city street address of well if located within city?  
**The well is located approximately 176 feet north and 1,670 feet west of W 2<sup>nd</sup> Ave and SW Dike Road in Augusta.**  
**Latitude N37° 40' 22.98" Longitude W96° 59' 44.89"**

|                                                             |                                                   |
|-------------------------------------------------------------|---------------------------------------------------|
| 2 WATER WELL OWNER: <b>Williams Petroleum Services, LLC</b> |                                                   |
| RR#, St. Address, Box # : <b>PO Box 3483</b>                | Board of Agriculture, Division of Water Resources |
| City, State, ZIP Code : <b>Tulsa, Oklahoma 74101-3483</b>   | Application Number: <b>Not Applicable</b>         |

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

4 DEPTH OF COMPLETED WELL **23** ft. ELEVATION: \_\_\_\_\_

Depth(s) Groundwater Encountered 1 **15** ft. 2 \_\_\_\_\_ ft. 3 \_\_\_\_\_ ft.

WELL'S STATIC WATER LEVEL **18.93** 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 **23** ft. and \_\_\_\_\_ in. to \_\_\_\_\_ ft.

WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well

1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)

2 Irrigation 4 Industrial 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 _____ |
| <b>2</b> PVC | 4 ABS      | 6 Asbestos-Cement | 9 Other (specify below) | Welded _____                             |
|              |            | 7 Fiberglass      |                         | <b>Threaded</b>                          |

Blank casing diameter **2** in. to **13** 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  | <b>3</b> 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 **13** ft. to **23** ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

GRAVEL PACK INTERVALS: From **10** ft. to **23** ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout **3 Bentonite** 4 Other \_\_\_\_\_

Grout Intervals From **0** ft. to **10** 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  | <b>16</b> Other (specify below) |
|                          |                 |                 | 13 Insecticide storage | <b>oil collection pond</b>      |

Direction from well? **SE** How many feet? **approximately 1,085**

| FROM     | TO        | CODE      | LITHOLOGIC LOG                | FROM | TO | PLUGGING INTERVALS |
|----------|-----------|-----------|-------------------------------|------|----|--------------------|
| <b>0</b> | <b>23</b> | <b>03</b> | <b>Dark brown, silty clay</b> |      |    |                    |
|          |           |           |                               |      |    |                    |
|          |           |           |                               |      |    |                    |
|          |           |           |                               |      |    |                    |
|          |           |           |                               |      |    |                    |
|          |           |           |                               |      |    |                    |
|          |           |           |                               |      |    |                    |
|          |           |           |                               |      |    |                    |
|          |           |           |                               |      |    |                    |
|          |           |           |                               |      |    |                    |

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) **8/25/08** 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) **3/19/09** under the business name of **Thiele Geotech, Inc.** by (signature) *D. J. Thiele*

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

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SEC