PA01-17

| WATER WELL RE  | CORD   | Form W                    | WC-5  | Division  | of Water     | r Resources App. N       | 0.               |  |
|--|--|---------------------------|---|---|--------------|--------------------------|------------------|--|
| 1 LOCATION OF WATER WELL: County: Butler   |  | Fraction<br>NW45 E 1/4 SE | 1/4 AJLJ 1/4  | Section Nu<br>27  | umber        | Township No. T 27 S      | Range Number R 4 |  |
| Street/Rural Address of Well Location; if unknown, distance & direction  |  |                           | Global Positioning System (GPS) information:          |   |              |                          |                  |  |
| from nearest town or intersection: If at owner's address, check here .   |  |                           |   | Latitude: .3767.3.288 (in decimal degrees)                |              |                          |                  |  |
| Former August Refinery; W. 2nd Ave., Augusta, KS   |  |                           |   | Longitude: 96. 481.647 (in decimal degrees)               |              |                          |                  |  |
|  |  |                           |   |   | Elevation:   |                          |                  |  |
| 2 WATER WELL OWNER: Williams Petroleum Services  |  |                           |   | Datum: ✓ WGS 84, ☐ NAD 83, ☐ NAD 27<br>Collection Method: |              |                          |                  |  |
| RR#, Street Address  | _ " "  | lliams Center             | GPS unit (Make/Model: Garmin 60C                      |   |              |                          |                  |  |
| City, State, ZIP Coo   | 1-   | OK 74101                  | ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey |   |              |                          |                  |  |
|  |  |                           |   | Est. Accurac  | icy: 🗌 <     | 3 m, 🔽 3-5 m, 🗀          | ] 5-15 m,        |  |
| 3 LOCATE WELL WITH AN "X" IN 4 DEPTH OF COMPLETED WELL   |  |                           |   |   |              |                          |                  |  |
| SECTION BOX:   | • · · · · · · · · · · · · · · · · · · ·                                    |                           |   |   |              |                          |                  |  |
| N  | WELL'S STATIC WATER LEVEL 1:73ft. below land surface measured on mo/day/yr |                           |   |   |              |                          |                  |  |
|  | Pump test data: Well water wasft. after hours pumping gpm                  |                           |   |   |              |                          |                  |  |
| EST. YIELDgpm. Well water wasft. after hours pumping   |  |                           |   |   |              |                          | nping gpm        |  |
| W  |  | ter 8in. to               |   |   |              |                          |                  |  |
| WELL WATER TO BE USED AS: Public water supply Geothermal Injection   |  |                           |   |   |              |                          |                  |  |
| SWSE 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  |  |                           |   |   |              |                          |                  |  |
| s  |  |                           |   |   |              |                          |                  |  |
| mile  Water well disinfected? ☐ Yes ☑ No   |  |                           |   |   |              |                          |                  |  |
| 5 TYPE OF CASING USED: Steel PVC Other   |  |                           |   |   |              |                          |                  |  |
| CASING JOINTS: Glued Clamped Welded Threaded   |  |                           |   |   |              |                          |                  |  |
| Casing diameter .2 in. to  |  |                           |   |   |              |                          |                  |  |
| Casing height above land surface30   |  |                           |   |   |              |                          |                  |  |
| TYPE OF SCREEN OR PERFORATION MATERIAL:  |  |                           |   |   |              |                          |                  |  |
| ☐ Steel ☐ Stainless Steel  |  |                           |   |   |              |                          |                  |  |
| SCREEN OR PERFORATION OPENINGS ARE:  |  |                           |   |   |              |                          |                  |  |
| 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  |  |                           |   |   |              |                          |                  |  |
| SCREEN-PERFORATED INTERVALS: From  |  |                           |   |   |              |                          |                  |  |
| From   |  |                           |   |   |              |                          |                  |  |
| From ft. to  |  |                           |   |   |              |                          |                  |  |
| 6 GROUT MATERIAL: Neat cement Cement grout Denotite Other  |  |                           |   |   |              |                          |                  |  |
| 6 GROUT MATERIAL: Neat cement Cement grout Bentonite Other   |  |                           |   |   |              |                          |                  |  |
| What is the nearest source of possible contamination:  |  |                           |   |   |              |                          |                  |  |
| Septic tank  |  |                           |   |   |              |                          |                  |  |
| Sewer lines Cesspool Sewage lagoon Fuel storage Abandoned water well Watertight sewer lines Seepage pit Feedyard Fertilizer storage Oil well/gas well  |  |                           |   |   |              |                          |                  |  |
|  |  |                           |   | _   | _            |                          |                  |  |
| FROM TO  | LITHOLOG   | GIC LOG                   | FROM  | TO LI   | THO. L       | OG (cont.) <u>or</u> PLI | UGGING INTERVALS |  |
|  | Clay   |                           |   |   |              |                          |                  |  |
| 1.2.   |  |                           |   |   |              |                          |                  |  |
|  |  | 110/4                     |   |   |              |                          |                  |  |
|  |  |                           |   |   | <del> </del> |                          |                  |  |
|  |  |                           |   |   |              |                          |                  |  |
|  |  |                           |   |   |              |                          |                  |  |
|  |  |                           |   |   |              |                          |                  |  |
|  |  |                           |   |   |              |                          |                  |  |
|  |  |                           |   | 7   | /            |                          |                  |  |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ★ constructed, or □ plugged   |  |                           |   |   |              |                          |                  |  |
| under my jurisdiction and was completed on (mc/lay/year) 59  |  |                           |   |   |              |                          |                  |  |
| Kansas Water Well Contractor's License No. 119   |  |                           |   |   |              |                          |                  |  |
| INSTRUCTIONS: Use typewriter of ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies  |  |                           |   |   |              |                          |                  |  |
| (white, blue, pink) to Kansas Depar tment of Health and E nvironment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 666 12-1367. 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. Vi sit us at |  |                           |   |   |              |                          |                  |  |
| http://www.kdheks.gov/waterwell/index.html.  KSA 82a-1212 Check: White Copy, Blue Copy, Pink Copy  |  |                           |   |   |              |                          |                  |  |
| 12011 024-1212   |  |                           |   | CHOCK.  | **,          | Сору, 🗀 Б                | copy, Link copy  |  |