

AOC B-01

WATER WELL RECORD

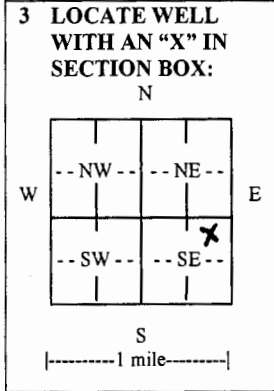
Form WWC-5

Division of Water Resources App. No.

1 LOCATION OF WATER WELL: County: Butler, Fraction: SW 1/4 NE 1/4 NE 1/4 SE 1/4, Section Number: 2728, Township No.: T 27 S, Range Number: R 4 E W

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: Former August Refinery; W. 2nd Ave., Augusta, KS. Global Positioning System (GPS) information: Latitude: 37.670998, Longitude: 96.991279

2 WATER WELL OWNER: Williams Petroleum Services, RR#, Street Address, Box #: One Williams Center, City, State, ZIP Code: Tulsa, OK 74101. Collection Method: GPS unit (Make/Model: Garmin 60C)



3 LOCATE WELL WITH AN 'X' IN SECTION BOX: N, W, E, S. 4 DEPTH OF COMPLETED WELL: 17 ft. Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL..... ft. below land surface measured on mo/day/yr..... 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 17..... ft., and..... in. to..... ft. WELL WATER TO BE USED AS: Public 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..... Water well disinfected? Yes No

5 TYPE OF CASING USED: Steel, PVC, Other. CASING JOINTS: Glued, Clamped, Welded, Threaded. Casing diameter 2..... in. to 7..... ft., Diameter..... in. to..... ft., Diameter..... in. to..... ft. Casing height above land surface 30..... in., Weight..... lbs./ft., Wall thickness or gauge No. Sch. 40. TYPE OF SCREEN OR PERFORATION MATERIAL: 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, Drilled holes, None (open hole), Louvered shutter, Key punched, Wire wrapped, Saw cut, Other (specify). SCREEN-PERFORATED INTERVALS: From 17..... ft. to 7..... ft., From..... ft. to..... ft., From..... ft. to..... ft. GRAVEL PACK INTERVALS: From 17..... ft. to 5..... ft., From..... ft. to..... ft., From..... ft. to..... ft.

6 GROUT MATERIAL: Neat cement, Cement grout, Bentonite, Other. Grout Intervals: From 5..... ft. to 2..... ft., From..... ft. to..... ft., From..... ft. to..... ft. What is the nearest source of possible contamination: Septic tank, Lateral lines, Pit privy, Livestock pens, Insecticide storage, Other (specify below), Sewer lines, Cesspool, Sewage lagoon, Fuel storage, Abandoned water well, Watertight sewer lines, Seepage pit, Feedyard, Fertilizer storage, Oil well/gas well. Direction from well..... Distance from well.....

Table with columns: FROM, TO, LITHOLOGIC LOG, FROM, TO, LITHO. LOG (cont.) or PLUGGING INTERVALS. Row 1: FROM 0, TO 17, LITHOLOGIC LOG Silty Clay.

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo/day/year) 5/19/14 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 710. This Water Well Record was completed on (mo/day/year) 10/27/2014 under the business name of Below Ground Service, Inc. by (signature) [Signature]

INSTRUCTIONS: Use typewriter or 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 Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. 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. Visit us at http://www.kdheks.gov/waterwell/index.html.