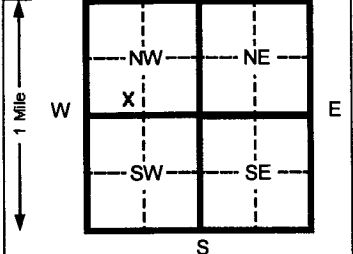


1 LOCATION OF WATER WELL:					Fraction	Section Number	Township Number	Range Number
County: <b>Montgomery</b>					<b>SE</b> ¼ <b>SW</b> ¼ <b>NW</b> ¼	<b>12</b>	T <b>35</b> S	R <b>16</b> <b>E</b>

Distance and direction from nearest town or city street address of well if located within city?  
**2602 S. Walnut St. - Coffeyville**

2 WATER WELL OWNER: **El Paso Merchant Energy-Petroleum Co.**  
 RR#, St. Address, Box #: **2 N. Nevada** Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: **Colorado Springs, CO 80903** Application Number: \_\_\_\_\_

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



4 DEPTH OF COMPLETED WELL **20.5** ft. ELEVATION: **723.85 (TOC)**  
 Depth(s) Groundwater Encountered 1 **17** ft. 2 \_\_\_\_\_ ft. 3 \_\_\_\_\_ ft.  
 WELL'S STATIC WATER LEVEL **7.31** ft. below TOC 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 **8.25** in. to **20.5** 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 **X**

5 TYPE OF BLANK CASING USED:  
 1 Steel **2 PVC** 3 RMP (SR) 4 ABS  
 5 Wrought Iron 6 Asbestos-Cement 7 Fiberglass  
 8 Concrete tile 9 Other (specify below)  
 CASING JOINTS: Glued \_\_\_\_\_ Clamped \_\_\_\_\_  
 Welded \_\_\_\_\_ Threaded **Flush**

Blank casing diameter **2** in. to **5.5** ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Casing height above land surface **0** in., weight **0.703** lbs./ft. Wall thickness or gauge No. **SCH. 40**

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

SCREEN OR PERFORATION OPENINGS ARE:  
 1 Continuous slot 2 Louvered shutter 3 Mill slot **3 Mill slot** 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 10 Other (specify) 11 None (open hole)

SCREEN-PERFORATED INTERVALS: From **5.5** ft. to **20.5** ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 GRAVEL PACK INTERVALS: From **4** ft. to **20.5** ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite **3 Bentonite** 4 Other  
 Grout Intervals From **1** ft. to **4** ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

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

Direction from well? \_\_\_\_\_ How many feet? \_\_\_\_\_

FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
<b>0</b>	<b>1.5</b>		<b>Topsoil, sandy clay, dark brown</b>			
<b>1.5</b>	<b>9</b>		<b>Silty Clay, brown, some fine sand</b>			
<b>10</b>	<b>17</b>		<b>Sandy Clay</b>			
<b>17</b>	<b>20.5</b>		<b>Clayey Sand</b>			

**Survey Date: 03/06/15; Datum: NAD83**  
**Latitude: N 37.015261**  
**Longitude: W 95.615886**

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) **02/24/15** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **531** This Water Well Record was completed on (mo/day/yr) **03/23/15** under the business name of **GSI Engineering, LLC** by (signature) \_\_\_\_\_

INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

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