COPY

Reply to: (785) 296-3565 FAX (785) 296-5509
Bureau of Water - Geology Section
1000 S. W. Jackson, Ste. 420
Topeka, KS 66612-1367

KANSAS DEPARTMENT OF HEALTH & ENVIRONMENT

ASSIGNMENT OF WATER WELL TO LANDOWNER

I, Ronald M. Bixenman of 12515 S. Road 50
(Landowner's address)

Grainfield, KS. 67737-3907 am the landowner on which a water well is located in
(City) (State)
the SW quarter of the SW quarter of the NW quarter in Section 9, Township 10S, Range 29 E/W, in Sheridan County, Kansas which is approximately 2,540 feet north/~~south~~, and 5 feat east/~~west~~ of the apparent NW section corner. The water well was drilled in July 2010 (month/year).

I hereby request that Nor-West Kansas Oil, L.L.C. leave the water well,
(Operator name)
which was drilled by Temporary Water Permit # 20100324, unplugged, and I will assume all responsibility for the plugging of said water well in accordance with the requirements of the Kansas Department of Health and Environment regulation K.A.R. 28-30-7.

LANDOWNER:

Ron Bixenman 4-6-12
(Signature) (Date)

Ronald M. Bixenman
(Print)

IF ADDITIONAL LANDOWNER
Kenneth Bixenman 4-6-12
(Signature) (Date)
Kenneth Bixenman
(Print)

Daryl Bixenman 4-6-12
Daryl Bixenman

OPERATOR:

4/3/12
(Signature) (Date)

By: Nor-West Kansas Oil L.L.C.
(Agent)
Patrick G. Wanker, Sec-Treas.,

RECEIVED
APR 19 2012
BUREAU OF WATER

WWC-7

WATER WELL RECORD Form WWC-5

Division of Water Resources App. No. 20100324

1 LOCATION OF WATER WELL: Fraction: ¼ SW ¼ SW ¼ SW ¼ | Section Number: 9 | Township Number: T 10 S | Range Number: R 29 ☐E ☒W

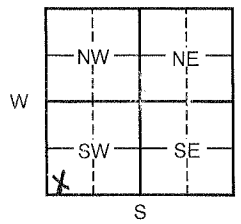
County: **Sheridan**

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☐.
200 ft north from SE corner—5270 ft west from SE corner

Global Positioning System (GPS) information:
Latitude: _____ (in decimal degrees)
Longitude: _____ (in decimal degrees)
Elevation: _____
Datum: ☐ WGS 84, ☐ NAD 83, ☐ NAD 27
Collection Method:
☐ GPS unit (Make/Model: _____)
☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey
Est. Accuracy: ☐ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m

2 WATER WELL OWNER: Bixenman Bros
RR#, St. Address, Box # Rt 2, Box 32
City, State, ZIP Code Grainfield, KS 67737

3 LOCATE WELL WITH AN "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL 210 ft.
Depth(s) Groundwater Encountered (1) _____ ft. (2) _____ ft. (3) _____ ft.
WELL'S STATIC WATER LEVEL NA 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
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 4.5 in. to 170 ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft.
Casing height above land surface 18 in., Weight 2.38 lbs./ft. Wall thickness or gauge No. .248
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 170 ft. to 210 ft., From _____ ft. to _____ ft.
From _____ ft. to _____ ft., From _____ ft. to _____ ft.
GRAVEL PACK INTERVALS: From 20 ft. to 210 ft., From _____ ft. to _____ ft.
From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: ☐ Neat cement ☒ Cement grout ☐ Bentonite ☐ Other _____
Grout Intervals From 0 ft. to 20 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 None
Direction from well _____ Distance from well _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	2	Surface	120	138	Fine sand w/clay & caliche strks
2	23	Loess	138	160	Fine to some med sand w/clay & caliche strk
23	34	Fine & med sand w/caliche & clay strks	160	171	Fine & med sand w/clay strks
34	45	Caliche w/clay strks	171	183	Clay w/sandy clay strks
45	54	Clay & caliche w/sand lenses	183	191	Fine sand w/clay strks
54	60	Fine & med sand w/clay & caliche strks	191	205	Fine & med sand w/clay strks
60	69	Fine & med sand	205	220	Yellow ochre, black shale
69	94	Fine sand w/clay & caliche strks			
94	101	Clay & caliche w/sand lenses			
101	120	Fine to some med sd w/clay & caliche len			

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) 7/29/10 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 554 or 783. This Water Well Record was completed on (mo/day/year) 8-3-10 under the business name of Woofter Pump & Well Inc. by (signature) _____

INSTRUCTIONS: 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 785-296-5522. Send one 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.

Check: ☐ White Copy, ☐ Blue Copy, ☐ Pink Copy