

WATER WELL RECORD

Form WWC-5

1362382

Division of Water Resources App. No.

Well ID

Original Record Correction Change in Well Use

1 LOCATION OF WATER WELL:

Fraction

Section Number

Township Number

Range Number

County:

¼ ¼ ¼ ¼

T S

R E W

2 WELL OWNER: Last Name:

First:

Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:

Business:

Address:

Address:

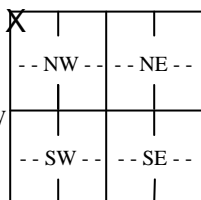
City:

State:

ZIP:

3 LOCATE WELL WITH "X" IN SECTION BOX:

N



S

|-----1 mile-----|

4 DEPTH OF COMPLETED WELL:

Depth(s) Groundwater Encountered: 1) ft.

2) ft. 3) ft., or 4) Dry Well

WELL'S STATIC WATER LEVEL: ft.

below land surface, measured on (mo-day-yr).....

above land surface, measured on (mo-day-yr).....

Pump test data: Well water was ft.

after hours pumping gpm

Well water was ft.

after hours pumping gpm

Estimated Yield:gpm

Bore Hole Diameter: in. to ft. and

..... in. to ft.

5 Latitude:(decimal degrees)

Longitude:(decimal degrees)

Datum: WGS 84 NAD 83 NAD 27

Source for Latitude/Longitude:

GPS (unit make/model:)

(WAAS enabled? Yes No)

Land Survey Topographic Map

Online Mapper:

6 Elevation:ft. Ground Level TOC

Source: Land Survey GPS Topographic Map

Other

7 WELL WATER TO BE USED AS:

1. Domestic:

- Household
- Lawn & Garden
- Livestock

2. Irrigation

3. Feedlot

4. Industrial

5. Public Water Supply: well ID

6. Dewatering: how many wells?

7. Aquifer Recharge: well ID

8. Monitoring: well ID

9. Environmental Remediation: well ID

Air Sparge Soil Vapor Extraction

Recovery Injection

10. Oil Field Water Supply: lease

11. Test Hole: well ID

Cased Uncased Geotechnical

12. Geothermal: how many bores?

a) Closed Loop Horizontal Vertical

b) Open Loop Surface Discharge Inj. of Water

13. Other (specify):

Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:

Water well disinfected? Yes No

8 TYPE OF CASING USED: Steel PVC Other

CASING JOINTS: Glued Clamped Welded Threaded

Casing diameter in. to ft., Diameter in. to ft., Diameter in. to ft.

Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No.

TYPE OF SCREEN OR PERFORATION MATERIAL:

Steel Stainless Steel Fiberglass PVC Other (Specify)

Brass Galvanized Steel Concrete tile None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

Continuous Slot Mill Slot Gauze Wrapped Torch Cut Drilled Holes Other (Specify)

Louvered Shutter Key Punched Wire Wrapped Saw Cut None (Open Hole)

SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft., From ft. to ft.

GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft., From ft. to ft.

9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other

Grout Intervals: From ft. to ft., From ft. to ft., From ft. to ft.

Nearest source of possible contamination:

- | | | | | |
|---|--|--|---|---|
| <input type="checkbox"/> Septic Tank | <input type="checkbox"/> Lateral Lines | <input type="checkbox"/> Pit Privy | <input type="checkbox"/> Livestock Pens | <input type="checkbox"/> Insecticide Storage |
| <input type="checkbox"/> Sewer Lines | <input type="checkbox"/> Cess Pool | <input type="checkbox"/> Sewage Lagoon | <input type="checkbox"/> Fuel Storage | <input type="checkbox"/> Abandoned Water Well |
| <input type="checkbox"/> Watertight Sewer Lines | <input type="checkbox"/> Seepage Pit | <input type="checkbox"/> Feedyard | <input type="checkbox"/> Fertilizer Storage | <input type="checkbox"/> Oil Well/Gas Well |
- Other (Specify)

Direction from well? Distance from well? ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS

Notes:

11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo-day-year) under the business name of

Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.

KS Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-3565.

Visit us at <http://www.kdheks.gov/waterwell/index.html>

KSA 82a-1212



ASSIGNMENT OF WATER WELL TO LANDOWNER

I, James & Julia Myers of 113 W. Greeley
(Landowner's address)

Tribune KS am the landowner on which a water well is located in the
(City) (State)

_____ quarter of the _____ quarter of the _____ quarter of the NW quarter of Section 5,
Township 17 S, Range 38 E/W, in Wichita County, Kansas which is approximately
5180 feet north/south, and 5180 feet east/west of the apparent SE/4 section corner.

The water well was drilled in August 17 (month/year).

I hereby request that Lario Oil & Gas Company leave the water well,
(Well operator/owner name)

20170190 OR
which was drilled under Temporary/Term Water Permit # 20170176, 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:
[Signature] 07-17-17
(Signature) (Date)
James V. Myers
(Print)

WELL OWNER:
LARIO OIL & GAS COMPANY
[Signature] _____
(Signature) (Date)
By: Paula R. Sullivan
(Agent) District Landman, CPL
Paula R. Sullivan

IF ADDITIONAL LANDOWNER
[Signature] 7-17-17
(Signature) (Date)
Julia C. Myers
(Print)