(9) WATER WELL RECORD Form WWC-5 KSA 82a-1212 COPY

1 LOCATION OF WATER WELL	Fraction	Section Number	Township Number	Range Number
County: Ellsworth	~~NW~~ ¼ NE ¼ ~~SE~~ SW ¼	30	T 17 S	R 9 E/W

Distance and direction from nearest town or city? 2 East 1 North Bushton

Street address of well if located within city?

2 WATER WELL OWNER: Hydrocarbon Transportation Inc.
RR#, St. Address, Box # : Box 5-L # 26 OB
City, State, ZIP Code : Bushton, Kansas 67427

Board of Agriculture, Division of Water Resources Application Number:

3 DEPTH OF COMPLETED WELL 82 ft. Bore Hole Diameter 10 in. to 82 ft., and ..... in. to ..... ft.

Well Water to be used as:
1 Domestic 3 Feedlot 5 Public water supply 6 Oil field water supply 7 Lawn and garden only 8 Air conditioning 9 Dewatering X Observation well 11 Injection well 12 Other (Specify below)
2 Irrigation 4 Industrial

Well's static water level NA ft. below land surface measured on ..... month ..... day ..... year

Pump Test Data: Well water was ..... ft. after ..... hours pumping ..... gpm
Est. Yield NA gpm: Well water was ..... ft. after ..... hours pumping ..... gpm

4 TYPE OF BLANK CASING USED:
X Steel 3 RMP (SR) 5 Wrought iron 6 Asbestos-Cement 8 Concrete tile 9 Other (specify below)
2 PVC 4 ABS 7 Fiberglass

Casing Joints: Glued ..... Clamped ..... Welded X Threaded X

Blank casing dia 4 in. to 17 ft., Dia 4 in. to 77 ft., Dia ..... in. to ..... ft.

Casing height above land surface 36 in., weight 10 lbs./ft. Wall thickness or gauge No .....

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

Screen or Perforation Openings Are:
1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes X Torch cut 10 Other (specify) .....

Screen-Perforation Dia 4 in. to 22 ft., Dia 4 in. to 82 ft., Dia ..... in to ..... ft.

Screen-Perforated Intervals: From 17 ft. to 22 ft., From 77 ft. to 82 ft.
From ..... ft. to ..... ft., From ..... ft. to ..... ft.

Gravel Pack Intervals: From ~~Sx~~ 4 ft. to 82 ft., From ..... ft. to ..... ft.
From ..... ft. to ..... ft., From ..... ft. to ..... ft.

5 GROUT MATERIAL: X1 Neat cement 2 Cement grout 3 Bentonite 4 Other .....

Grouted Intervals: From 0 ft. to 4 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

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

Direction from well South How many feet 50 ? Water Well Disinfected? Yes X No

Was a chemical/bacteriological sample submitted to Department? Yes ..... No X ; If yes, date sample was submitted ..... month ..... day ..... year: Pump Installed? Yes ..... No X

If Yes: Pump Manufacturer's name ..... Model No. ..... HP ..... Volts .....

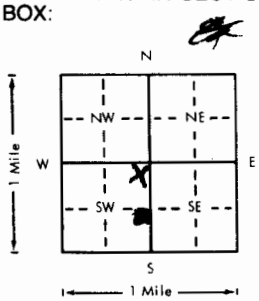
Depth of Pump Intake ..... ft. Pumps Capacity rated at ..... gal./min.

Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was X(1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on June month 4 day 1981 year and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 359

This Water Well Record was completed on June month 12 day 1981 year under the business name of Daryl Cox & Sons Inc. by (signature) Daryl Cox

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



FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	5	topsoil			
5	15	brown clay (dark)			
15	20	brown clay (light)			
20	26	yellow clay w/ limestone layers			
26	58	sandstone			
58	67	red clay			
67	77	sandrock w/ blue clay			
77	82	blue shale			
82		stop			
		(Observation well to draw samples & check for contamination)			

ELEVATION:

Depth(s) Groundwater Encountered 1 ..... ft. 2 ..... ft. 3 ..... ft. 4 ..... ft. (Use a second sheet if needed)

INSTRUCTIONS: Use typewriter or ball point pen, *please press firmly* and *PRINT* clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Division of Environment, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY T 17 R 9 E/W SEC. 30 NE ¼ NE ¼ SW ¼