| WATER WELL RECO | RD | Form V | WWC-5 | Division of Wate | r Resources App. N | 20140387 |
|---|---------------------|--|---|--|-----------------------|-----------------------------|
| 1 LOCATION OF WATER WELL: | | Fraction | | Section Number Township No. Range Number | | |
| County: Rice | | | W 1/4 SW 1/4 | 27 | T 18 S | R 10 □E ☑W |
| Street/Rural Address of V | f unknown, distance | Global Positioning System (GPS) information: | | | | |
| from nearest town or intersection: If at owner's address, check here | | | | Latitude: (in decimal degrees) | | |
| 3 1/4 South, 1 West of Bushton | | | | Longitude: (in decimal degrees) | | |
| | | | | Elevation: | | |
| 2 WATER WELL OWNER: Valhalla Exploration | | | | Datum: WGS 84, NAD 83, NAD 27 | | |
| RR#, Street Address, Box #: 8100 E. 22nd St North- Bldg 18 | | | | GPS unit (Make/Model:) | | |
| City, State, ZIP Code : Wichita, KS 67226 | | | | Digital Map/Pl | ioto, 🗌 Topographi | ic Map, 🗌 Land Survey |
| | | Est. Accuracy: | | | | |
| 3 LOCATE WELL WITH AN "X" IN 4 DEPTH OF COMPLETED WELL 170 ft. | | | | | | |
| WITH AN "X" IN SECTION BOX: N WELL'S STATIC WATER LEVEL31ft. below land surface measured on mo/day/yr. 5-2-1 | | | | | | |
| N W | ELL'S STAT | IC WATER LEVEL | 31 ft | helow land surface i | measured on mo/d | av/vr 5-1-14 |
| Pump test data: Well water was | | | | | | |
| EST VIELD N/A com Well victor vice & offer hours number of | | | | | | |
| W - NW - - NE - EST. FIELD JWAgpin. Well water was | | | | | | |
| WELL WATER TO BE USED AS: ☐ Public water supply ☐ Geothermal ☐ Injection well | | | | | | |
| Domestic Feedlot Oil field water supply Dewatering Other (Specify below) | | | | | | |
| | | | | | | |
| Was a chemical/bacteriological sample submitted to Department? ☐ Yes ☑ No | | | | | | |
| S If yes, mo/day/yr sample was submitted | | | | | | |
| 1 mile Water well disinfected? ☑ Yes □ No | | | | | | |
| 5 TYPE OF CASING USED: Steel V PVC Other | | | | | | |
| CASING JOINTS: ☑ Glued ☐ Clamped ☐ Welded ☐ Threaded | | | | | | |
| Casing diameter .5 in. to .170 ft., Diameter in. to ft., Diameter ft. | | | | | | |
| Casing height above land surface 18 in., Weight SDR 26 lbs./ft., Wall thickness or gauge No. | | | | | | |
| | | | | Od (C16-) | | |
| ☐ Steel ☐ Stainless Steel ☐ PVC ☐ Other (Specify) | | | | | | |
| 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 | | | | | | |
| CD AVEL DACK D | TEDMALC | From | . ft. to | ft., From | ft. | to ft. |
| GRAVEL PACK INTERVALS: From 170 ft. to 20 ft., From ft. to | | | | | | to ft. |
| From | | | | | | |
| Grout Intervals: From | ft to | in ⊡ Cement gro ft Fre | m 20 | t to 0 | From | ft. toft. |
| What is the nearest source of | possible conta | mination: | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | 110111 | . It. to |
| 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 South FROM TO LITHOLOGIC LOG FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS | | | | | | |
| | LITHOLOG | IC LOG | FROM | TO LITHO. LO | JG (cont.) or PLU | GGING INTERVALS |
| 0 3 Top soil 3 86 Tan clay | | | | | | |
| | y & ironated i | -ook | | | | |
| 104 122 Shale & s | | OCK | | | | |
| 122 135 Gray shale | | | | | | |
| | Sandstone | | | | | |
| | Blue shale | | | | | |
| 100 110 2100 011010 | | | | | | |
| | | | | | | |
| | | | | | | |
| 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 - 3 : | | | | | | |
| Kansas Water Well Contractor's License No. 134 This Water Well Record was completed on (mo/day/year) 5-23-14 | | | | | | |
| under the business name of Rosencrantz-Bemis Ent Inc by (signature) | | | | | | |
| INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) to Kansas Depar tment of Health and E nvironment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 666 12-1367. | | | | | | |
| (white, blue, pink) to Kansas Depar | tment of Health | and Environment, Burea | u of Water, Geolog | ry Section, 1000 SW Jac | ckson St., Suite 420, | Topeka, Kansas 666 12-1367. |
| Telephone 785-296-5524. Sen'd one copy to WATER WELL OWNER and retain one for your records. Include <u>fee</u> of \$5.00 for each constructed well. Vi sit us at http://www.kdheks.gov/waterwell/index.html. | | | | | | |
| KSA 82a-1212 Check: White Copy, ☐ Blue Copy, ☐ Pink Copy | | | | | | |