

WATER WELL RECORD

Form WWC-5

1364827

Division of Water
Resources App. No.

Well ID

☐ Original Record ☐ Correction ☐ Change in Well Use

1 LOCATION OF WATER WELL:

County:

Fraction

 $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$

Section Number

Township Number

T S

Range Number

R ☐ E ☐ W

2 WELL OWNER: Last Name:

First:

Business:

Address:

Address:

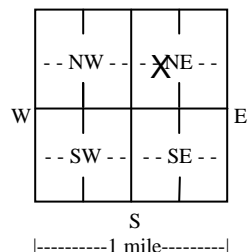
City:

State:

ZIP:

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

N



4 DEPTH OF COMPLETED WELL: ft.

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 ☐ TOCSource: ☐ Land Survey ☐ GPS ☐ Topographic Map☐ Other

7 WELL WATER TO BE USED AS:

1. Domestic:

☐ Household☐ Lawn & Garden☐ Livestock2. ☐ Irrigation3. ☐ Feedlot4. ☐ Industrial5. ☐ Public Water Supply: well ID6. ☐ Dewatering: how many wells?7. ☐ Aquifer Recharge: well ID8. ☐ Monitoring: well ID

9. Environmental Remediation: well ID

☐ Air Sparge ☐ Soil Vapor Extraction☐ Recovery ☐ Injection10. ☐ Oil Field Water Supply: lease

11. Test Hole: well ID

☐ Cased ☐ Uncased ☐ Geotechnical

12. Geothermal: how many bores?

a) Closed Loop ☐ Horizontal ☐ Verticalb) Open Loop ☐ Surface Discharge ☐ Inj. of Water13. ☐ Other (specify):Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:Water well disinfected? ☐ Yes ☐ No8 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:

☐ Septic Tank☐ Lateral Lines☐ Pit Privy☐ Livestock Pens☐ Insecticide Storage☐ Sewer Lines☐ Cess Pool☐ Sewage Lagoon☐ Fuel Storage☐ Abandoned Water Well☐ Watertight Sewer Lines☐ Seepage Pit☐ Feedyard☐ Fertilizer Storage☐ 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

County: Wichita Fraction: NW NE SW NE Sec. 4 T 19 S R 37 W

CORRECTION(S) TO WATER WELL COMPLETION RECORD (WWC-7) - to rectify lacking or incorrect information

Owner: Kent Knobbe (formerly: Lario Oil & Gas)

If corrected, location was listed as:

Location changed to:

Section-Township-Range: _____

Fraction ($\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$): NW NE

NW NE SW NE

Other changes: Initial statements: _____

Changed to: Change of ownership (WWC-7) form was incorrect quarter calls

Comments: This correction only applies to the WWC-7 form

Verification method: Google earth & WWC-5 online mapper

Initials: KS Date: 12/6/17

Submitted by: ☒ Kansas Geological Survey, Data Resources Library, 1930 Constant Avenue, Lawrence, KS 66047-3724
☐ Kansas Dept. of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367



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

ASSIGNMENT OF WATER WELL TO LANDOWNER

I, Keat Knobbe of 100 W Broadway
(Landowner's address)

Leoti KS 67461 am the landowner on which a water well is located in the
(City) (State)

_____ quarter of the _____ quarter of the NW/4 quarter of the NE/4 quarter of Section 4,
Township 19 S, Range 37 E/W, in Wichita County, Kansas which is approximately
_____ feet north/south, and _____ feet east/west of the apparent _____ section corner.

The water well was drilled in August/September 2017 (month/year).

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

which was drilled under Temporary/Term Water Permit # 20170206, 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:

Keat Knobbe 8-24-17
(Signature) (Date)

Keat Knobbe
(Print)

WELL OWNER:

Lario Oil & Gas Company
(Signature) (Date)

By: Paula R. Sullivan
(Agent) District Landman, CPL

IF ADDITIONAL LANDOWNER

(Signature) (Date)

(Print)

RECEIVED

SEP 11 2017

BUREAU OF WATER