			WWC-5			of Water	20180158				
			ge in Well Use			s App. No.		Well ID			
		WATER WELL:	Fraction			Number	Township Numb		ge Number		
				8 T 20 S				R 11	□E ■ W		
			First:	Street or	et or Rural Address where well is located (if unknown, distance and						
Address		Casino Petroleum LLC Box 415 direction from nearest town or intersection): If at owner's addres							heck here:		
Address											
City:	Ellinwo	od State: KS	ZIP: 67526		,						
3 LOCA	TE WELL			75	75 00 000000						
WITH "X" IN 4 DEPTH OF COMPLETED WELL:									decimal degrees)		
SECTION BOX: Depth(s) Groundwater Encountered: 1)					tt. Longitude: 98.556803 (decimal degrees)						
	2)					TAME IN COURT OF TAME IN THE PARTY OF TAME IN THE P					
	below land surface, measured on (mo-day-yr					7 40 40 Bource for Dantage Long Rude.					
NNV	200	measured on (mo-day)	-yı)		GPS (unit make/model:)						
1444	□ above land surface, measured on (mo-day-yr) Pump test data: Well water was					(= 10 engoleg: [] 103 [] 101					
w						☐ Land Survey ☐ Topographic Map ☐ Online Mapper:					
CATA	Well water v			r was ft.			C. Ommo mapper				
SW -	1 1	after hours	after hours pumping gpm			C 170					
	x	Estimated Yield:gpm			6	6 Elevation:ft. Ground Level TOC					
1 , ,	S		Hole Diameter:10 in. to75 ft. and			Source:					
1 mile in. to											
7 WELL WATER TO BE USED AS: 1. Domestic: 5. \(\property \) Public Water Supply: well ID 10 \(\property \) Oil Field Water Supply: leave Herter											
	Domestic: 5. ☐ Public Water Supply: well ID					10. Oil Field Water Supply: lease Herter					
	☐ Lawn & Garden O. ☐ Dewatering: now many wells: 7. ☐ Aquifer Recharge: well ID								•••		
	□ Lawn & Garden 7. □ Aquifer Recharge: well ID □ Livestock 8. □ Monitoring: well ID										
	Diversion Section Diversion Divers										
	3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Extra										
4. Industrial Recovery Injection					13. Other (specify):						
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:											
Water well disinfected? Yes \(\sum \) No											
8 TYPE OF CASING USED: Distant M DVC Distant M CASING JOINTS: M Cheel D Charles A DVC D Other											
Casing diameter											
Casing height above land surface 18 in Weight SDR-26 the /ft Well 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											
GRAVEL PACK INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Grout Intervals: From											
Nearest source of possible contamination:											
■ Septic □ Sewer		Lateral Lines		-		tock Pens	☐ Insectici				
		☐ Cess Pool ☐ Seepage Pit	☐ Sewage Lag		Fuel S		☐ Abandor		eli		
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well ☐ Other (Specify)											
Direction from well? East Distance from well? 200ft ft.											
10 FROM	TO	LITHOLOG	IC LOG	FROM			IO. LOG (cont.) or F	I UGGINIC	INTEDMATO		
0		Top soil		- 130171	1	Lill	HOO (WIIL) OF I	DOUDDOL.	MIERVALS		
2		Fine sand			+						
7		Gravel- med									
29		Tan clay									
30		Gravel- med									
74		Gray shale			+						
				Notes:							
				110163.							
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) /-15-18 and this record is true to the heat of my length land at 11.00 c.											
Kansas Water Well Contractor's License No. 134 This Water Well Record was completed on (mo_day_veer) 8-8-18											
under the business name of topsencrantz- bemis Ent Inc Signature											
Mail I white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section											
1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.											
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015											