

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |                                                                                                                           |                                                   |                         |                                |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|-------------------------|--------------------------------|
| 1 LOCATION OF WATER WELL:                                                                                                                                                                                                                                                                                                                                                                                                                                               |    | Fraction                                                                                                                  | Section Number                                    | Township Number         | Range Number                   |
| County: STAFFORD                                                                                                                                                                                                                                                                                                                                                                                                                                                        |    | SE 1/4 NW 1/4 SW 1/4                                                                                                      | 26                                                | T 22 S                  | R 12W E/W                      |
| Distance and direction from nearest town or city street address of well if located within city?                                                                                                                                                                                                                                                                                                                                                                         |    |                                                                                                                           |                                                   |                         |                                |
| 2-E 1/4 N. OF HUDSON, KS                                                                                                                                                                                                                                                                                                                                                                                                                                                |    |                                                                                                                           |                                                   |                         |                                |
| 2 WATER WELL OWNER: HAMP OIL CO,                                                                                                                                                                                                                                                                                                                                                                                                                                        |    |                                                                                                                           |                                                   |                         |                                |
| RR#, St. Address, Box # : BOX 391                                                                                                                                                                                                                                                                                                                                                                                                                                       |    |                                                                                                                           | Board of Agriculture, Division of Water Resources |                         |                                |
| City, State, ZIP Code : PONCA CITY, OK. 74602                                                                                                                                                                                                                                                                                                                                                                                                                           |    |                                                                                                                           | Application Number: 94-0311                       |                         |                                |
| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:                                                                                                                                                                                                                                                                                                                                                                                                                    |    | 4 DEPTH OF COMPLETED WELL... 84 ft. ELEVATION:                                                                            |                                                   |                         |                                |
|                                                                                                                                                                                                                                                                                                                                                                                         |    | Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.                                                                     |                                                   |                         |                                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |    | WELL'S STATIC WATER LEVEL . . 14 ft. below land surface measured on mo/day/yr                                             |                                                   |                         |                                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |    | Pump test data: Well water was . . . ft. after . . . hours pumping . . . gpm                                              |                                                   |                         |                                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |    | Est. Yield . . . gpm: Well water was . . . ft. after . . . hours pumping . . . gpm                                        |                                                   |                         |                                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |    | Bore Hole Diameter . . 9 in. to . . ft., and . . in. to . . ft.                                                           |                                                   |                         |                                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |    | WELL WATER TO BE USED AS:                                                                                                 |                                                   |                         |                                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |    | 5 Public water supply 8 Air conditioning 11 Injection well                                                                |                                                   |                         |                                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |    | 1 Domestic 3 Feedlot X6 Oil field water supply 9 Dewatering 12 Other (Specify below)                                      |                                                   |                         |                                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |    | 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well                                                       |                                                   |                         |                                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |    | Was a chemical/bacteriological sample submitted to Department? Yes. . . No. X. . . If yes, mo/day/yr sample was submitted |                                                   |                         |                                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |    | Water Well Disinfected? Yes X No                                                                                          |                                                   |                         |                                |
| 5 TYPE OF BLANK CASING USED:                                                                                                                                                                                                                                                                                                                                                                                                                                            |    |                                                                                                                           |                                                   |                         |                                |
| 1 Steel                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |    | 3 RMP (SR)                                                                                                                | 5 Wrought iron                                    | 8 Concrete tile         | CASING JOINTS: Glued X Clamped |
| X2 PVC                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |    | 4 ABS                                                                                                                     | 6 Asbestos-Cement                                 | 9 Other (specify below) | Welded                         |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |                                                                                                                           | 7 Fiberglass                                      |                         | Threaded                       |
| Blank casing diameter . . 5 in. to . . 74 ft. Dia . . in. to . . ft. Dia . . in. to . . ft.                                                                                                                                                                                                                                                                                                                                                                             |    |                                                                                                                           |                                                   |                         |                                |
| Casing height above land surface . . 12 in. weight . . lbs./ft. Wall thickness or gauge No. . .                                                                                                                                                                                                                                                                                                                                                                         |    |                                                                                                                           |                                                   |                         |                                |
| TYPE OF SCREEN OR PERFORATION MATERIAL:                                                                                                                                                                                                                                                                                                                                                                                                                                 |    |                                                                                                                           |                                                   |                         |                                |
| 1 Steel                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |    | 3 Stainless steel                                                                                                         | 5 Fiberglass                                      | 8 RMP (SR)              | 10 Asbestos-cement             |
| 2 Brass                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |    | 4 Galvanized steel                                                                                                        | 6 Concrete tile                                   | 9 ABS                   | 11 Other (specify)             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |                                                                                                                           |                                                   |                         | 12 None used (open hole)       |
| SCREEN OR PERFORATION OPENINGS ARE:                                                                                                                                                                                                                                                                                                                                                                                                                                     |    |                                                                                                                           |                                                   |                         |                                |
| 1 Continuous slot                                                                                                                                                                                                                                                                                                                                                                                                                                                       |    | X3 Mill slot                                                                                                              | 5 Gauzed wrapped                                  | 8 Saw cut               | 11 None (open hole)            |
| 2 Louvered shutter                                                                                                                                                                                                                                                                                                                                                                                                                                                      |    | 4 Key punched                                                                                                             | 6 Wire wrapped                                    | 9 Drilled holes         |                                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |                                                                                                                           | 7 Torch cut                                       | 10 Other (specify)      |                                |
| SCREEN-PERFORATED INTERVALS: From . . 74 ft. to . . 84 ft. From . . ft. to . . ft.                                                                                                                                                                                                                                                                                                                                                                                      |    |                                                                                                                           |                                                   |                         |                                |
| GRAVEL PACK INTERVALS: From . . 20 ft. to . . 84 ft. From . . ft. to . . ft.                                                                                                                                                                                                                                                                                                                                                                                            |    |                                                                                                                           |                                                   |                         |                                |
| 6 GROUT MATERIAL: 1 Neat cement 2 Cement grout X3 Bentonite 4 Other                                                                                                                                                                                                                                                                                                                                                                                                     |    |                                                                                                                           |                                                   |                         |                                |
| Grout Intervals: From . 0 ft. to . . 20 ft. From . . ft. to . . ft. From . . ft. to . . ft.                                                                                                                                                                                                                                                                                                                                                                             |    |                                                                                                                           |                                                   |                         |                                |
| What is the nearest source of possible contamination:                                                                                                                                                                                                                                                                                                                                                                                                                   |    |                                                                                                                           |                                                   |                         |                                |
| 1 Septic tank                                                                                                                                                                                                                                                                                                                                                                                                                                                           |    | 4 Lateral lines                                                                                                           | 7 Pit privy                                       | 10 Livestock pens       | 14 Abandoned water well        |
| 2 Sewer lines                                                                                                                                                                                                                                                                                                                                                                                                                                                           |    | 5 Cess pool                                                                                                               | 8 Sewage lagoon                                   | 11 Fuel storage         | 15 Oil well/Gas well           |
| 3 Watertight sewer lines                                                                                                                                                                                                                                                                                                                                                                                                                                                |    | 6 Seepage pit                                                                                                             | 9 Feedyard                                        | 12 Fertilizer storage   | 16 Other (specify below)       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |                                                                                                                           |                                                   | 13 Insecticide storage  | NONE KNOWN                     |
| Direction from well? How many feet?                                                                                                                                                                                                                                                                                                                                                                                                                                     |    |                                                                                                                           |                                                   |                         |                                |
| FROM                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | TO | LITHOLOGIC LOG                                                                                                            | FROM                                              | TO                      | PLUGGING INTERVALS             |
| 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 3  | TOP SOIL                                                                                                                  |                                                   |                         |                                |
| 3                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 68 | CLAY                                                                                                                      |                                                   |                         |                                |
| 68                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 84 | GRAVEL                                                                                                                    |                                                   |                         |                                |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) . . 8-22-94 . . and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. . . 462 . . This Water Well Record was completed on (mo/day/yr) . . 10-20-94 . . under the business name of SAM'S WATER WELL SERVICE by (signature) [Signature] |    |                                                                                                                           |                                                   |                         |                                |
| 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, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.                                                                                                         |    |                                                                                                                           |                                                   |                         |                                |