

1 LOCATION OF WATER WELL:		Fraction	Township Number	Range Number	
County: <u>Reno</u>		<u>SE 1/4 NW 1/4 NW 1/4</u>	<u>22</u>	<u>23 S R 6 E/W</u>	
Distance and direction from nearest town or city street address of well if located within city? <u>1 1/2 miles West of South Hutchinson</u>					
2 WATER WELL OWNER: <u>Koch Hydrocarbon</u>		Board of Agriculture, Division of Water Resources			
RR#, St. Address, Box #: <u>PO Box 29</u>		Application Number:			
City, State, ZIP Code: <u>Milford, Oklahoma 73559</u>					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>42</u> ft. ELEVATION:			
<p>Diagram: A square divided into four quadrants by dashed lines. The top-left quadrant is labeled 'NW' and contains an 'X'. The other quadrants are labeled 'NE', 'SW', and 'SE'. To the left of the square is a vertical arrow pointing up and down, labeled 'N' at the top and 'S' at the bottom. To the right of the square is a horizontal arrow pointing left and right, labeled 'W' on the left and 'E' on the right.</p>		Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL <u>9</u> 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 _____ in. to _____ ft., and _____ in. to _____ ft.		WELL WATER TO BE USED AS:			
1 Domestic		3 Feedlot	6 Oil field water supply	9 Dewatering	
2 Irrigation		4 Industrial	7 Lawn and garden only	10 Monitoring well	
5 Public water supply		8 Air conditioning	11 Injection well	12 Other (Specify below)	
Was a chemical/bacteriological sample submitted to Department? Yes _____ No _____. If yes, mo/day/yr sample was submitted _____					
Water Well Disinfected? Yes _____ No _____					
5 TYPE OF BLANK CASING USED:					
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____					
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____					
Blank casing diameter <u>2</u> " in. to _____ ft., Dia. _____ in. to _____ ft., Dia. _____ in. to _____ ft.					
Casing height above land surface _____ 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) <u>NA</u>					
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 10 Other (specify) <u>NA</u>					
SCREEN-PERFORATED INTERVALS: From <u>999</u> ft. to <u>999</u> ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____					
Grout Intervals: From <u>42</u> ft. to <u>0</u> 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)					
Direction from well? _____ How many feet? _____					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
			<u>42</u>	<u>0</u>	Hole plug Dirt
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) <u>3-5-96</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>134</u> This Water Well Record was completed on (mo/day/yr) <u>3-5-96</u> under the business name of <u>Rosenblatt Bemis Ent Inc.</u> by (signature) <u>Doug Dodson</u>					

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.