

WATER WELL RECORD Form WWC-5 KSA 82a-1212

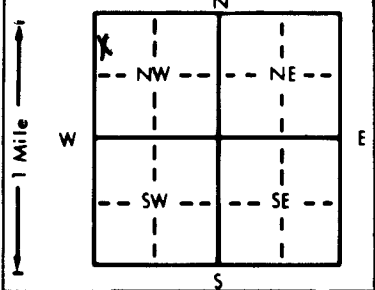
1 LOCATION OF WATER WELL: County: <u>Edwards</u>	Fraction <u>W 1/2</u> <u>1/4</u> <u>NW</u> <u>1/4</u> <u>NW</u> <u>1/4</u>	Section Number <u>36</u>	Township Number <u>T 24</u> <u>S</u>	Range Number <u>R 16</u> <u>EW</u>
--	---	-----------------------------	---	---------------------------------------

Distance and direction from nearest town or city street address of well if located within city?

1 3/4 south, 3 3/4 west of Macksville, Ks.

2 WATER WELL OWNER: Castelli Exploration Inc.
 RR#, St. Address, Box # : 9500 Westgate Drive-Suite 101 Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : Oklahoma City, OK. 73162 Application Number: 980045

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL: 130 ft. **ELEVATION:** _____

Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.

WELL'S STATIC WATER LEVEL 16 ft. below land surface measured on mo/day/yr 3-3-98

Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm

Est. Yield na gpm: Well water was _____ ft. after _____ hours pumping _____ gpm

Bore Hole Diameter 9 in. to 130 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	6 <u>Oil field water</u> supply
2 Irrigation	4 Industrial	7 Lawn and garden only
		9 Dewatering
		10 Monitoring well
		12 Other (Specify below)

Was a chemical/bacteriological sample submitted to Department? Yes _____ No X _____; If yes, mo/day/yr sample was submitted _____

Water Well Disinfected? Yes _____ No X _____

5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	Welded _____
2 <u>PVC</u>	4 ABS	7 Fiberglass		Threaded _____

Blank casing diameter 5 in. to 100 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.

Casing height above land surface 2 in., weight SDR 26 lbs./ft. Wall thickness or gauge No. _____

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless steel	5 Fiberglass	7 <u>PVC</u>	10 Asbestos-cement
2 Brass	4 Galvanized steel	6 Concrete tile	8 RMP (SR)	11 Other (specify) _____
			9 ABS	12 None used (open hole)

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	
		7 Torch cut	10 Other (specify) _____	

SCREEN-PERFORATED INTERVALS: From 130 ft. to 100 ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From 130 ft. to 20 ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other hole plug

Grout Intervals: From 20 ft. to 0 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	<u>oil well tank batt</u>

Direction from well? west How many feet? 900

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Tough top soil			
3	6	Tough brown clay			
6	22	Sandy brown clay			
22	48	Brown & white clay			
48	61	Fine sand brown & white clay mixed			
61	67	Sand and gravel clean, coarse & loose			
67	75	Blue gray clay			
75	107	Brown & white clay			
107	125	Sand and gravel clean, coarse & loose			
125	130	Brownish gray clay			

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) 3-3-98 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 134 This Water Well Record was completed on (mo/day/yr) 3-9-98 under the business name of Rosencrantz-BEmis by (signature) Freddie Dodson

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.

OFFICE USE ONLY
T
R
EM
SEC.
1/4
1/4
1/4