



ASSIGNMENT OF WATER WELL TO LANDOWNER

I, WANDA JOAN CLARK of 70056 NE 110 Street  
(Landowner's address)

Preston KS 67583 am the landowner on which a water well is located in  
(City) (State)  
the SW quarter of the NE quarter of the NW quarter in Section 33, Township 25,  
Range 12 E/W, in STAFFORD County, Kansas which is approximately  
990 feet north/~~south~~, and 1745 feet ~~east~~/west of the apparent 33 section  
corner. The water well was drilled in 10/2011 (month/year).

I hereby request that L. D. DRILLING, INC. leave the water well,  
(Operator name)

which was drilled by Temporary Water Permit # 20110501, 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:  
Wanda J. Clark 4-30-12  
(Signature) Wanda J Clark (Date)

Wanda J. Clark  
(Print)

OPERATOR:  
Susan C. Schneeweis 4-3-12  
(Signature) Susan C. Schneeweis (Date)  
Employee of L D Drilling, Inc.

By: \_\_\_\_\_  
(Agent)

IF ADDITIONAL LANDOWNER  
\_\_\_\_\_  
(Signature) (Date)  
\_\_\_\_\_  
(Print)

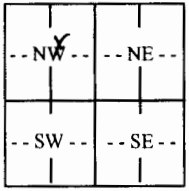
**WATER WELL RECORD**

**Form WWC-5**

Division of Water Resources App. No.

20110501

<b>1 LOCATION OF WATER WELL:</b> County: <b>Stafford</b>	Fraction <b>¼ SW ¼ NE ¼ NW ¼</b>	Section Number <b>33</b>	Township No. <b>T 25 S</b>	Range Number <b>R 12</b> <input type="checkbox"/> E <input checked="" type="checkbox"/> W
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input type="checkbox"/> <b>8S, 2W of Stafford, KS</b>		<b>Global Positioning System (GPS) information:</b> Latitude: ..... (in decimal degrees) Longitude: ..... (in decimal degrees) Elevation: ..... Datum: <input type="checkbox"/> WGS 84, <input type="checkbox"/> NAD 83, <input type="checkbox"/> NAD 27 Collection Method: <input type="checkbox"/> GPS unit (Make/Model: .....) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> <3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> >15 m		
<b>2 WATER WELL OWNER:</b> <b>Wanda Joan Clark</b> RR#, Street Address, Box #: <b>70056 NE 110 St.</b> City, State, ZIP Code : <b>Preston, KS 67583</b>				

<b>3 LOCATE WELL WITH AN "X" IN SECTION BOX:</b> N  W E S  -----1 mile-----	<b>4 DEPTH OF COMPLETED WELL</b> <b>87</b> ..... ft. Depth(s) Groundwater Encountered (1) <b>15</b> ..... ft. (2) ..... ft. (3) ..... ft. WELL'S STATIC WATER LEVEL <b>15</b> ..... ft. below land surface measured on <b>mo/day/yr. 10/26/11</b> ..... Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm EST. YIELD <b>50</b> ..... 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: <input type="checkbox"/> Public water supply <input type="checkbox"/> Geothermal <input type="checkbox"/> Injection well <input type="checkbox"/> Domestic <input type="checkbox"/> Feedlot <input checked="" type="checkbox"/> Oil field water supply <input type="checkbox"/> Dewatering <input type="checkbox"/> Other (Specify below) <input type="checkbox"/> Irrigation <input type="checkbox"/> Industrial <input type="checkbox"/> Domestic-lawn & garden <input type="checkbox"/> Monitoring well ..... Was a chemical/bacteriological sample submitted to Department? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, mo/day/yr sample was submitted ..... Water well disinfected? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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**5 TYPE OF CASING USED:**  Steel  PVC  Other .....

CASING JOINTS:  Glued  Clamped  Welded  Threaded

Casing diameter **.5** ..... in. to **.47** ..... ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.  
 Casing height above land surface **12** ..... in., Weight **2.8** ..... lbs./ft., Wall thickness or gauge No. **Sch. 40** .....

TYPE OF SCREEN OR PERFORATION MATERIAL:  
 Steel  Stainless Steel  PVC  Other (Specify) .....  
 Brass  Galvanized Steel  None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:  
 Continuous slot  Mill slot  Gauze wrapped  Torch cut  Drilled holes  None (open hole)  
 Louvered shutter  Key punched  Wire wrapped  Saw cut  Other (specify) .....

SCREEN-PERFORATED INTERVALS: From **.47** ..... ft. to **.87** ..... ft., From ..... ft. to ..... ft.  
 From ..... ft. to ..... ft., From ..... ft. to ..... ft.

GRAVEL PACK INTERVALS: From **.20** ..... ft. to **.87** ..... ft., From ..... ft. to ..... ft.  
 From ..... ft. to ..... ft., From ..... ft. to ..... ft.

**6 GROUT MATERIAL:**  Neat cement  Cement grout  Bentonite  Other .....

Grout Intervals: From **.0** ..... ft. to **.23** ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

What is the nearest source of possible contamination:  
 Septic tank  Lateral lines  Pit privy  Livestock pens  Insecticide storage  Other (specify below)  
 Sewer lines  Cesspool  Sewage lagoon  Fuel storage  Abandoned water well  
 Watertight sewer lines  Seepage pit  Feedyard  Fertilizer storage  Oil well/gas well .....

Direction from well **West** ..... Distance from well **.95** .....

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	7	top sand			
7	19	clay			L. D. Drilling. Inc.
19	65	sand and gravel			7 SW 26th Ave.
65	87	sand and gravel with clay streaks			Great Bend. KS 67530
					Clark #1-33

**7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was  constructed,  reconstructed, or  plugged under my jurisdiction and was completed on (mo/day/year) **10/26/11** ..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **186** ..... This Water Well Record was completed on (mo/day/year) **11/03/11** ..... under the business name of **Kelly's Water Well Service, Inc.** ..... by (signature) *Kathryn L. Sead* .....

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at <http://www.kdheks.gov/waterwell/index.html>.

Bureau of Water  
Geology Section  
1000 SW Jackson St, Ste 420  
Topeka, KS 66612-1367



**COPY**

Phone: 785-296-3565  
Fax: 785-296-5509  
rharper@kdheks.gov  
www.kdheks.gov/geo

Robert Moser, MD, Secretary

Department of Health & Environment

Sam Brownback, Governor

February 10, 2012

L D DRILLING  
7 SW 26TH AVE  
GREAT BEND, KS 67530

Re: Appropriation of Water, Application Number 20110501 00

Dear Sir/Madam:

The Division of Water Resources, Kansas Department of Agriculture (DWR) has notified the Kansas Department of Health and Environment (KDHE) the above described Temporary Permit has been issued. The Temporary Permit originally authorized the use of groundwater to be withdrawn by means of the water supply well located as described below:

1 well located in the SW NE NW of SECT 33, T25S, R12W, Stafford County, Kansas.

Temporary Permits are issued for a duration of 6 months by the DWR. After the Temporary Permit expires KDHE considers the water well abandoned and Kansas Administrative Regulation (K.A.R.) 28-30-7(a) requires abandoned water wells to be plugged or caused to be plugged by the landowner. Once a water well has been plugged, K.A.R. 28-30-4 requires a plugging report (Form WWC-5 or WWC-5 "P") to be completed and returned to KDHE.

Please answer the following question concerning the water well. Sign on the signature line and return this letter to: KDHE, Attn: Geology Section, Bureau of Water, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367 within two weeks from the date of this letter. If this form is not returned within two weeks, this may result in a follow-up by KDHE to determine the status of the well. If you have questions or need assistance with the form please contact Richard Harper at (785) 296-3565 or by e-mail at [rharper@kdheks.gov](mailto:rharper@kdheks.gov).

Sincerely,

A handwritten signature in cursive script that reads "Richard D. Harper".

Richard Harper, LG  
Water Well Unit Chief  
Geology Section/Bureau of Water

cc: KDHE  
SWDO  
Stafford 04

RECEIVED  
MAY 03 2012  
BUREAU OF WATER