WATER WELL RECORD — Form WWC-5

Division of Water Resources App. No. ____

1 LOCATION OF WATER WELL: County: Finney

Fraction: ¼ SE ¼ SE ¼ NE ¼ | Section Number: 19 | Township No.: T 26 S | Range Number: R 33 ☐E ☑W

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☐.

Stone Rd & TV Rd 1/2 South

Global Positioning System (GPS) information:
Latitude: 37.7737 (in decimal degrees)
Longitude: 100.9625 (in decimal degrees)
Elevation: 2764
Datum: ☐ WGS 84, ☐ NAD 83, ☐ NAD 27
Collection Method:
☑ GPS unit (Make/Model: Garmin)
☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey
Est. Accuracy: ☐ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m

2 WATER WELL OWNER: Brexco
RR#, Street Address, Box #: P.O. Box 564
City, State, ZIP Code: Sublett, KS 67877

3 LOCATE WELL WITH AN "X" IN SECTION BOX:

N
NW | NE
W — X — E
SW | SE
S
|--------1 mile--------|

4 DEPTH OF COMPLETED WELL 465 ft.
Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft.
WELL'S STATIC WATER LEVEL.....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 7/8 in. to .....ft., and .....in. to .....ft.
WELL WATER TO BE USED AS: ☐ Public water supply ☐ Geothermal ☐ Injection well
☐ Domestic ☐ Feedlot ☑ Oil field water supply ☐ Dewatering ☐ Other (Specify below)
☐ Irrigation ☐ Industrial ☐ Domestic-lawn & garden ☐ Monitoring well .....
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 CASING USED: ☐ Steel ☑ PVC ☐ Other Eagle Loc
CASING JOINTS: ☐ Glued ☐ Clamped ☐ Welded ☐ Threaded
Casing diameter 5 in. to 465 ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.
Casing height above land surface 24 in., Weight SDR 17 lbs./ft., Wall thickness or gauge No. .....
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 320 ft. to 340 ft., From 360 ft. to 380 ft.
From 400 ft. to 420 ft., From 440 ft. to 460 ft.
GRAVEL PACK INTERVALS: From 20 ft. to 465 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 20 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 NA Distance from well .....

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	30	Topsoil & Brown Clay Little Sand	380	420	Cliche Little Clay
30	85	Sand & Gravel	420	450	Sand Little Clay
85	95	Brown Clay	450	465	Brown Clay
95	200	Sand & Gravel Little Clay			
200	220	Sand Little Cliche			
220	240	Sand With Gray clay			
240	320	Fine to Medium Sand Little Clay			
320	340	Sand & Clay Mix			
340	360	Cemented Sand & Cliche			
360	380	Hard Clay			

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) 6-1-11 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 473 This Water Well Record was completed on (mo/day/year) 6-19-11 under the business name of Tyler Water Well Inc by (signature) [signature]

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 320, 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.

KSA 82a-1212

Check: ☐ White Copy, ☐ Blue Copy, ☐ Pink Copy