B.

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

1 LOCATION OF WATER WELL: County: KIOWA | Fraction: C ¼ NE ¼ NW ¼ | Section Number: 32 | Township Number: T 29 S | Range Number: R 18 E/W

Distance and direction from nearest town or city street address of well if located within city? 7-S OF GREENSBERG, KS.

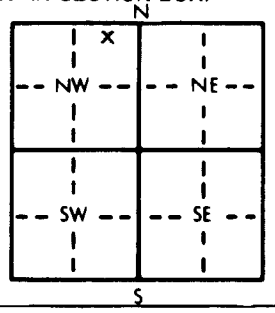
2 WATER WELL OWNER: VINCENT OIL CORP.

RR#, St. Address, Box # : 125 N. MARKET #1110

City, State, ZIP Code : WICHITA, KS. 67202

Board of Agriculture, Division of Water Resources Application Number: 92-0314

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



4 DEPTH OF COMPLETED WELL 79 ft. ELEVATION:

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

WELL'S STATIC WATER LEVEL 46 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 XX 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 ..... No X

5 TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below) XX PVC 4 ABS

CASING JOINTS: Glued X Clamped ..... Welded ..... Threaded .....

Blank casing diameter 5 in. to 69 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.

Casing height above land surface 18 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) XXX PVC 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 XX Mill slot 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 10 Other (specify) ..... 11 None (open hole); 2 Louvered shutter 4 Key punched

SCREEN-PERFORATED INTERVALS: From 69 ft. to 79 ft., From ..... ft. to ..... ft.

From ..... ft. to ..... ft., From ..... ft. to ..... ft.

GRAVEL PACK INTERVALS: From 20 ft. to 79 ft., From ..... ft. to ..... ft.

From ..... ft. to ..... ft., From ..... ft. to ..... ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout XX 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 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below) NONE

Direction from well? ..... How many feet? .....

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	TOP SOIL			
3	72	SAND & CLAY			
72	79	SHALE			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (XX) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 9-15-92 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 462-B This Water Well Record was completed on (mo/day/yr) 10-10-92 under the business name of SAM'S WATER WELL SERVICE by (signature) Lora Rafferm

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 E/W SEC. ¼ ¼ ¼