Reply to: (785) 296-3565 FAX (785) 296-5509 Bureau of Water - Geology Section 1000 S. W. Jackson, Ste. 420 Topeka, KS 66612-1367



c/water well section/forms/ db 5/2011

ASSIGNMENT OF WATER WELL TO LANDOWNER

| and the second s | | was the same of th |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| I, Myrland Hertlei | .n of | |
| | | (Landowner's address) |
| Ardmore Okl | | n the landowner on which a water well is located in |
| | / | e <u>SE</u> quarter in Section <u>12</u> , Township <u>29</u> , |
| Range 24 3 /W, in _ | Ford | C ounty, Kansas which is approximately |
| 1830 feet north/seath, | and <u>1470</u> | feet set/west of the apparent SE s ection |
| corner. The water well was | drilled inAug | gust 2011 (month/year). |
| I hereby request thatVin | | rporation leave the water well, for name) |
| which was drilled by Tem | porary Water Pe | ermit # 20110369 00 , u nplugged, and I will |
| assume all responsibility for | the plugging of | said water well in accordance with the requirements |
| of the Kansas Department o | f Health and Envi | ironment regulation K.A.R. 28-30-7. |
| LANDOWNER: X Myrland Hentlein (Signature) | 2/7/12 n.TTEE. (Date) | OPERATOR: (Signature) OPERATOR: (Signature) (Date) |
| Myrland Hertlein (Print) | | By: M.L. Korphage P.G. (Agent) Vincent Oil Corporation |
| IF ADDITIONAL LANDO | WNER | |
| (Signature) | (Date) | |
| (Print) | | |
| WWC-7 | | |

| LOCATION OF WATER WELL: Totaction NE V. SE VANW V. SE VANW V. SE V. SE VANW V. SE V. SE VANW V | | 7 0 | ¥7 ¥367% | NC 5 | D:- | isian of Water | r Docqurees Ann N | 20110369 | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|--------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|----------------------|---------------------------------|-----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| No. | WATER WELL RECOR | | | <u> </u> | | | | | |
| College Post College | | WELL: | | 1/ 0= 1/ | Sectio | | | | |
| Earthold: | County: Ford | | NE 1/4 SE 1/4 NW | 1'4 OE 1/4 | Claber | | | | |
| Constitution Cons | Street/Rural Address of Wel | Il Location; | t unknown, distance & | direction | Global | rosiuoning dae | ; system (GFS) II | (in decimal degrees) | |
| WATER WELL, OWNER: vincent oil Datum: WOS 84. NAD 83. NAD 27 | from nearest town or interse | ction: If at | owner's address, check | Latitude: | | | | | |
| WATER WELL OWNER: Vincent Oil | 1/4 North, 7 1/4 West of | | | | | | | | |
| WALER WELL OWNER: Vincent Cil RR8, Strest Address, Box 155 N Markat, 5:e 700 City, State, ZIP Code Wichita, Ks. 67202 Cily State, ZIP Code Cily State, ZiP C | | | Elevat | ion: | 4 [] NIAD 92 [| 1 NAD 27 | | | |
| RREF, Stree Address, Box #: 155 N Market. Sto 700 | ANY A POSTER ANY DATE OF A STATE OF | A.I. | | | ŧ, □ NAD 63, □ |] NAD 21 | | | |
| City, State, ZIP Code Wichita, Ks. 67202 Digital MapsPhoto, Topographis Maps. Land Survey Est. Accuracy. Grant, 3-5 m, 3-15 m, >15 m. | | | | | Conec | HOH WEHIOU. | e/Model· | · · · · · · · · · · · · · · · · · · · | |
| SUCCATE WELL WITH AN SY IN SECTION NO. Depth(s) Groundwater Fancountered (1) | | | and the second s | | ioital Man/Ph | oto [] Topographi | ic Map. Land Survey | | |
| STOPE OF CASINU USED: See Yes No | City, State, ZIP Code | : Wichita | , Ks. 67202 | Est A | ccuracy: \square < | 3 m. \square 3-5 m. \square | 5-15 m, >15 m | | |
| SECTION AND SECTION WELL'S STATIC WATER LEVEL. 1999. ft. below land surface measured on mo/day/yr. 8-222-11 ft. (3) ft. ft. ft. ft. ft. ft. ft. ft. ft | 2 YOUNT THEFT | | | | | | - / Name | | |
| SECTION BOX: Depth(s) Groundwater Encountered 1) | AND | EPTH OF | COMPLETED WELL | , 255 | | ft. | | | |
| STYPE OF CASING USED: Steel Pole PVC Other Other (Specify) Other (Spec | SECTION BOY: Den | th(e) Ground | Iwater Encountered | (1) | ft. | (2) | ft. | (3) ft. | |
| STYPE OF CASING USED: Steel Pole PVC Other Other (Specify) Other (Spec | N WE | TI 'S STAT | IC WATER LEVEL. 1 | 59ft. | below I | and surface r | neasured on mo/d | lay/yr8-22-11 | |
| NW NE EST. YIELD. N/A gpm Well water was | | Dumr | test data: Well water | · was | | after | nours pum | ping gpin | |
| Bore Hole Diameter 39 | | VIELD N | /A gom Well water | was | ft. | after | hours pun | nping gpm | |
| WELL WATER TO BE USED AS: | D | o Hole Dian | peter 10 in to 2 | 255 | t. and . | in. | to | .ft. | |
| Domestic Feedlot Oil feld water supply Dewatering Other (Specify below) | W E BOR | t i waten | TO BE HISED AS: | Public wat | er suppl | v □ Ge | othermal [| Injection well | |
| Irrigation | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | Feedlot 7 | Til field wate | er sunnly | De De | | | |
| Was a chemical/bacteriological sample submitted to Department? | 1 1 5/1/ 1 5/2 - 1 1 | | Industrial I | Domestic-lay | vn & gai | rden 🗆 Mo | onitoring well | | |
| Stype of Casing Useb: Steel | | imgation | /hastorialogical comple | cubmitted to | Denart | ment? | Yes V No | | |
| Mater well disinfected? Ves No | | s a chemical | /bacteriological sample | mitted | Dopart | шеш. | 100 2110 | | |
| TYPE OF CASING USED: | | If yes, mo | day/yr sample was suo | MIMUGU | | | | | |
| CASING JOINTS: | | | | | | | | | |
| CASING JOINTS: | 5 TYPE OF CASING USED | : Stee | | | | | ***** | | |
| Casing diameter 5. in. to 299. ft., Diameter in. to th., Diameter in., th., th., Diameter in., Diameter in., Diameter in., to th., Dia | CARDIC TODITC. 571 Chie | d \square Class | nned 🗀 Welded | ☐ Threaded | l | | | | |
| Casing height above land surface. 18. in, Weight SURY 29. lbs./ft., Wall thickness or gauge NO. TYPE OF SCREEN OR PERFORATION MATERIAL: Steel Stainless Steel Mone used (open hole) | | ユニュニー ひかか | 4 Diameter | in | tΩ | ft., D | iameter | in. to ft. | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: Steel Stainless Steel None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: Continuous slot Mill slot Gauze wrapped Torch cut Other (specify) Other (| Casing height above land su | rface18 | in., Weight | SDR-26 | lbs./fi | t., Wall thic | ckness or gauge N | lo | |
| Steel | TYPE OF SCREEN OR PERI | FORATION | MATERIAL: | | | | | | |
| Brass Galvanized Steel None used (open hole) | ☐ Steel ☐ Stainless | Steel | √ PVC | | Other (S | Specify) | | | |
| SCREEN OR PERFORATION OPENINGS ARE: Continuous slot | Brass Galvaniz | ed Steel | None used (open h | ole) | | | | | |
| Continuous slot Mill slot Gauze wrapped Torch cut Defined holes None (open note) | SCREEN OR PERFORATION | N OPENING | GS ARE: | | | | | | |
| SCREEN-PERFORATED INTERVALS: From | Continuous slot N | Aill slot | Gauze wrapped | Torch cut | ∐ Dri | lled holes | | | |
| SCREEN-PERFORATED INTERVALS: From | Louvered shutter K | Key punched | ☐ Wire wrapped Ь | ∐ Saw cut | ∐ Oth | er (specify) | | | |
| From | SCREEN-PERFORATED IN | TERVALS: | From255 | ft. to 435. | • • • • • • • • • • | ft., From | ۱۱. | . W 11. | |
| From ft. to ft., From ft., From ft. to ft., From ft., From ft. to ft., From ft. | | | From 1/0 | ti to 100 | | II From | | , tO | |
| GROUT MATERIAL: | GRAVEL PACK IN | TERVALS: | From. 255 | ft. to | | ft., From . | π | , to IL. | |
| Grout Intervals: From f. to ft., From 49. If. to ft., From 49. If., From | | | From | ft. to | | ft., From | <u>n</u> | . to It. | |
| Grout Intervals: From f. to ft., From 49. If. to ft., From 49. If., From | 6 GROUT MATERIAL: | ☐ Neat cem | ent Cement grout | t 🛛 Bento | nite 📮 | Other | | | |
| What is the nearest source of possible contamination: Septic tank | Grout Intervals: From | ft. t | o ft., Fron | ı . <u>20</u> | ft. to | ! ft., | , From | ft. tot. | |
| Septic tank Lateral lines Pit privy Livestock pens Sewer lines Sewer lines Sewage lagoon Fuel storage Abandoned water well None None Direction from well None None None Distance from well None | What is the nearest source of r | ossible con | tamination: | | | | | | |
| Sewer lines | | Lateral l | nes Pit privy | | | | | ther (specify below) | |
| Direction from well Distance from well . | Sewer lines | Cesspool | | | | | | ne. | |
| FROM TO LITHOLOGIC LOG FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS 0 | Watertight sewer lines | Seepage | pit Feedyard | | | | ,40 11011 | ••••• | |
| This besides to the plugged and the plugged and the plugged 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/year) 9-20-11 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/year) 9-20-11 by (signature) 9-20-11 | Direction from well | | | | | ell | OC (t) DI | LICCING INTERVALS | |
| 4 24 Tan clav & caliche 24 123 Tan clay 125 Tan clay & hard caliche 145 189 Sand & gravel- med 189 237 Tan clay 237 255 Sand & gravel- med 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 237 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/year) 9-29-11. under the business name of Rosenorantz. Bemis by (signature) Cross 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 a http://www.kdheks.gov/waterwell/index.html. | FROM TO | LITHOLO | GIC LOG | FROM | 10 | LITHO. L | OG (cont.) of PL | OGGING INTERVALS | |
| 143 Tan clay 124 125 Tan clay & hard caliche 145 189 Sand & gravel- med 189 237 Tan clay 237 255 Sand & gravel- med 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 7 constructed, or □ plugged under my jurisdiction and was completed on (mo/day/year) 8-22-11 | 0 4 Top soil | | | | | | | | |
| 143 Tan clay 124 125 Tan clay & hard caliche 145 189 Sand & gravel- med 189 237 Tan clay 237 255 Sand & gravel- med 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 7 constructed, or □ plugged under my jurisdiction and was completed on (mo/day/year) 8-22-11 | 4 24 Tan clay & | caliche | | | | 1 | | and the second s | |
| 145 Tan clay & hard caliche 145 189 Sand & gravel- med 189 237 Tan clay 237 255 Sand & gravel- med 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 7 constructed, □ reconstructed, or □ plugged under my jurisdiction and was completed on (mo/day/year) 8-22-11 | | | | <u> </u> . | | <u> </u> | | | |
| 189 Sand & gravel- med 189 237 Tan clay 237 255 Sand & gravel- med 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, or plugged under my jurisdiction and was completed on (mo/day/year) .8-22-11 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 1.34. This Water Well Record was completed on (mo/day/year) .9-29-11 under the business name of .Rosencrantz- Bemis by (signature) by (signature) Crowder Landow (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 (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 a http://www.kdheks.gov/waterwell/index.html. | | hard calich | ne | | | | | | |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 7 contractor's OR Landowner's Certification: This water well was 7 contractor's OR Landowner's Certification: This water well was 8 constructed, □ reconstructed, or □ plugged under my jurisdiction and was completed on (mo/day/year) 8-22-11 | | | 100 | | | | | | |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 7 constructed, 7 constructed, 7 constructed, 8 constructed, 9 reconstructed, or 9 plugged under my jurisdiction and was completed on (mo/day/year) 8-22-11 | | | | | | | | | |
| 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) 8-22-11 | | avel- med | | | | | | | |
| under my jurisdiction and was completed on (mo/day/year) 8-22-11 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/year) 9-20-11 under the business name of Rosencrantz-Bemis by (signature) by (signature) Separate of 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 a http://www.kdheks.gov/waterwell/index.html. | 201 200 Oand & gre | 11104 | | | | | | | |
| under my jurisdiction and was completed on (mo/day/year) 8-22-11 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/year) 9-20-11 under the business name of Rosencrantz-Bemis by (signature) by (signature) Separate of 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 a http://www.kdheks.gov/waterwell/index.html. | | | | | | | | , | |
| under my jurisdiction and was completed on (mo/day/year) 8-22-11 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/year) 9-20-11 under the business name of Rosencrantz-Bemis by (signature) by (signature) Separate of 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 a http://www.kdheks.gov/waterwell/index.html. | | | | | | | | WAY 1 | |
| under my jurisdiction and was completed on (mo/day/year) 8-22-11 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/year) 9-20-11 under the business name of Rosencrantz-Bemis by (signature) by (signature) Separate of 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 a http://www.kdheks.gov/waterwell/index.html. | W CONTENT CHOPSE OF Y | NIDOMAT | DIS CEDTIFICATIO | N. Thie wa | fer well | was 171 const | ructed. Trecons | structed, or plugged | |
| Kansas Water Well Contractor's License No. 1.34. This Water Well Record was completed on (110/day/year) was under the business name of Rosencrantz-Bemis by (signature) by (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 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 a http://www.kdheks.gov/waterwell/index.html. | 7 CONTRACTOR'S OR LA | MINDOWINE | on (molder/ween) 8-21 | 7.11 ma wa | and this: | record is true | to the best of my | knowledge and belief | |
| under the business name of | under my jurisdiction and was | s completed | on (mo/day/year) .9.744 | Water Wall | 1 61111 May 2 | vac complete | ed on (mo/day/yes | 9-20-11 | |
| INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> 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 <u>fee</u> of \$5.00 for each <u>constructed</u> well. Visit us a http://www.kdheks.gov/waterwell/index.html. | Kansas Water Well Contracto | r's License | NO Inis | water well. | Locoru V | vas comprete | | 0 1= | |
| (white, blue, pink) to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 3W Jackson 5t, other 129, support 100 3W Jackson 5t, other 129, support 129, support 100 3W Jackson 5t, other 129, support 129, suppo | under the business name of | <u> wożelictat</u> | IL TAGE PREGGERA | V and DDINIT | Dy (| Signature) | ks and check the corr | rect answers. Send three copies | |
| Telephone 785-296-5522. Send one copy to WATER WELL OWNER and retain one for your records. Include <u>lee</u> of \$5.00 for each <u>constituted</u> well. Visit as a http://www.kdheks.gov/waterwell/index.html. | | | | | | | | | |
| http://www.kdheks.gov/waterwell/index.html. | Telephone 785-296-5522 Send or | ne copy to WA | ATER WELL OWNER and | retain one for | your reco | ords. Include f | ee of \$5.00 for each | constructed well. Visit us at | |
| | http://www.kdheks.gov/waterwell/inc | dex.html. | | 47 | | | | | |
| | KSA 82a-1212 | | | | C | Check: 🔲 W | /hite Copy, 📙 I | Blue Copy, 🔲 Pink Copy | |

WATER RESOURCES RECEIVED

Submit To:

CHIEF ENGINEER Division of Water Resources Kansas Department of Agriculture 109 SW 9th Street, 2nd Floor Topeka, KS 66612-1283

APPLICATION FOR **TEMPORARY PERMIT**

SURFACE WATER

AUG 1 8 2011 GROUNDWATER KS DEPT OF AGRICULTURE



State of Kansas FO **GMD**

MEETS

www.ksda.gov/dwr (check one) STATUTORY FILING FEE OF \$200.00 MUST ACCOMPANY THIS APPLICATION (Make check payable to the Kansas Department of Agriculture)

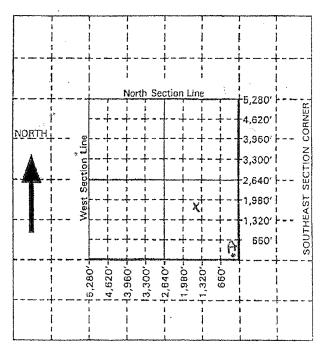
Applicant: (Please print or type) Vincent P.O. BOL 713 City and State Great Bend Zip Code 67530 Te Social Security I.D. No. and/or Taxpayer I.D. No Location of Point of Diversion: Sec. 12 Twp. 29 , Rng. 24 , AM). County, Kansas. Distance from Southeast Corner of Section: 1830 feet North from Southeast Corner feet West from Southeast Corner Existing water right? Yes 🗌 No 🕱 If yes, File No. Yes No No Pending application? If yes, File No. Water Use Data: Proposed Max. Pumping Rate (gpm) 40 6Pm Amount Requested (gallons) (not to exceed one million gallons unless for dewatering) 220-240 14. Depth of Well (feet) ___ Name of Stream Water is to be used for (briefly describe proposed use): drilling oil well Location of place of use:

| 3. | Period of use (6 months maximum): | | | | | | | |
|----|-----------------------------------|---------|--|--|--|--|--|--|
| | Commencing date: Aug. 22 2011 | DA — | | | | | | |
| | Ending Date: Dec. 22 2011 | | | | | | | |

Location of the proposed point of diversion shall be indicated on the diagram below. Use the center section.

If surface water, indicate on the diagram the course of the stream, and its name.

The scale of the diagram is 2 inches = 1 mile Each small square represents 10 acres



| For C | Office (| Jse | Only: | Code | _TMP | Fee \$ | 200 | TR# | Receipt | Date\$ | 18-11 | Check # |
|-------|----------|-----|-------|------|------|--------|-----|-----|-------------|--------|-------|---------|
| | | | | | | | | | | | | |