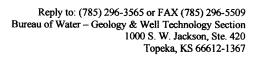
KOLAR Document ID: 1467153

		RECORD	Form W				sion of Wa		20190231				
				n Well Use			rces App.			Well ID			
1 LOCATION OF WATER WELL: Fraction County: Rawlins NE 1/4 NE 1/4 SW 1/4						Secti	on Number		Township Numb		ange Number		
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and Business: Black Oak Exploration direction from persent town or intersection): If at owner's address check berein											n, distance and		
Address		ik Exploration 5T. Paul St.			direction fi	direction from nearest town or intersection): If at owner's address, check here:							
Address	14/433	or. Faul St.			Intersect	ntersection of Rd 34 & Rd V							
City:	Denver	S	tate: CO	ZIP: 80210			J	<u> </u>	•				
3 LOCA		405											
	WITH "X" IN 4 DEPTH OF COMPLETED WELL:												
SECTI	ON BOX:	countered: 1)	ft. Longitude: 100 8017666					(decimal degrees)					
N 2) ft. 3)				ft., or 4)	Datum: ☑ WGS 84 ☐ NAD 83 ☐ NAD 27								
	2)					2010	Source	ce for	Latitude/Longitude				
, , ,						-9.19		GPS (1	ınit make/model:)		
Nw -	above land surface, measure Pump test data: Well water was				y-yı) ↔			WAAS enabled?					
l w									Survey Topogra				
				ater was ft.			Online Mapper:						
SW SE after hours			hours pu	pumpinggpm			0050						
Estimated Yield:30			:ld: 30	gpm			6 Elevation: .2853ft. ☑ Ground Level ☐ TOC						
	S	Bore Hole Dia	ameter:8	8 in. to 165 ft. and			Source: ☐ Land Survey ☐ GPS ☐ Topographic Map Other KOLAR						
	mile			in. to		☑ Other KOLAR							
		O BE USED AS											
1. Domestic		5. □ H	Public Water	Supply: well ID	••••••	•••	10. 🗷 O	il Fiel	ld Water Supply: le	ase MW.	ያ MS Farms #		
	Household 6. Dewatering: how many wells?					11			11. Test Hole: well ID				
	☐ Lawn & Garden 7. ☐ Aquifer Re			echarge: well ID			☐ Cased ☐ Uncased ☐ Geotechnical						
2. Irrigat	☐ Livestock 8. ☐ Monitoring: well ID					• • •	12. Geot	herma	l: how many bores	? <u></u>	********		
3. Feedle						•••	a) C	losed	Loop Horizonta	al 🔲 Ver	tical		
1	E.m. spange Good vapor E												
13. Guiet (specify).													
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☑ No If yes, date sample was submitted:													
Water well disinfected? Yes No													
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded													
Casing than	Casing diameter 4.5 in to 165 ft., Diameter in to ft., Diameter in to ft. Casing height above land surface 18 in to 18. Casing height above land surface 18 in to 18. Type of screen a result of the surface 18 in to 18. Type of screen a result of the surface 18. Type of screen a result of the surface 18. Type of screen a result of the surface 18. Type of screen a result of the surface 18. Type of screen a result of the surface 18. Type of screen a result of the surface 18. Type of screen a result of the surface 18. Type of screen a result of the surface 18. Type of screen a result of the surface 18. Type of screen a result of the surface 18. Type of screen a result of the surface 18. Type of screen a result of the surface 18. Type of screen a result of the surface 18.												
TYPE OF	SCREEN C	R PERFORATION	T III. ONI MATEI	weight	?9 lbs./	lt.	Wall thick	kness	or gauge No수의!	• • • • • • • • • • • • • • • • • • • •			
☐ Steel		inless Steel	ONWATE	MAL: ☑ PVC									
☐ Brass		lvanized Steel			used (open l	(داد،	LJ Ott	ner (S	pecify)	• • • • • • • • • • • • • • • • • • • •	•••••		
SCREEN (OR PERFO	RATION OPEN	NGS ARE	L Hone	uscu (open i	ioie)							
☐ Conti	nuous Slot	☐ Mill Slot	☐ Gauze	Wrapped TT	orch Cut F	l Dril	lled Holes	\Box (Other (Specify)				
☐ Louve	ered Shutter	☐ Key Punched	d □ Wire	Wranned IZ S	ass/Cut [7 Ni~+	an (Oman Li	Iala)					
SCREEN-]	PERFOR AT	'ED INTERVAL	S. From 1	25 eta 165	A Error	•	Δ.		ft., From	ft to	, _A		
	MAYEL FF	CKINIEKVAL	.S: From		2 ft. Fro	n	ft to	n.	ft From	A to	. 4		
GRAVEL PACK INTERVALS: From 20 ft. to 165 ft., From ft. to ft. 9 GROUT MATERIAL: Neat cement													
Orout Interv	413. 1 10111	······· IL. 10	.	. rrom	. II. IO		ff From		ft to	A	***********		
real est sou	ace or bossii	le contamination	: 🗸 No pot	ential source of co	ntamination	withi	n 200 ft.						
☐ Septic	Tank	☐ Lat	eral Lines	Pit Privy			vestock Pe	ns	☐ Insectici	de Storage			
☐ Sewer			ss Pool	☐ Sewage La	agoon	🗆 Fu	el Storage		Abandoi				
U Other	ight Sewer L	ines 🔲 See	page Pit	☐ Feedyard		☐ Fe	rtilizer Sto	rage	☐ Oil Well	/Gas Well	,		
Other (Specify) Direction from well? Distance from well? ft,													
10 FROM	TO	I IT	HOLOGIC	Distance from w	rell?	·····			ft.				
		surface	HOLUGIC	LUG	FROM	+-	TO	LITH	O. LOG (cont.) or I	PLUGGIN	G INTERVALS		
2		loess											
13	25	clay			-	+-							
25	128	caliche & clay v	W sand la-	1606	 	+							
128		fine to some m											
155		yellow ochre/bl		ciay lenses		-							
100	100	yellow ochre/bi	ack snale		1 37 /		<u> </u>						
		***			Notes:								
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION. This manner is													
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year) .07/29/2019 and this record is true to the best of my knowledge and belief.													
Natisas water well Contractor's License No. 991													
under the b	usiness nam	COL KANNINGCE	YITID GUY. Y	.Y50,.005,							+×1.V		
under the business name of Woofter Pump and Well, Inc. Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. KS Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-3565.													
KS Departn	nent of Health	and Environment, Bu	reau of Water	Geology Section, 10	000 SW Jacks	on St.,	Suite 420, '	Topeka	a, Kansas 66612-1367.	Telephone			
Visit us at http://www.kdheks.gov/waterwell/index html													





ASSIGNMENT OF WATER WELL TO LANDOWNER

I, Marlene Wolfram of	1312 West 2 m									
	(Landowner's address)									
I, Marlene Wolfram of	landowner on which a water well is located in the									
quarter of the SE quarter of the WW quarter of the WE quarter of Section 16										
	County, Kansas which is approximately									
feet horth/south, and 1460 feet east/west of the apparent 5 E section corner.										
The water well was drilled in $\frac{7}{3}$										
I hereby request that Black Oak Exploration, LLC leave the water well, (Well operator/owner name)										
which was drilled under Temporary/Term Water Permit # 2019031, 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:	WELL OWNER:									
Morlane Wolfram 9:23-19 (Signature) (Date)	WELL WNER: Gignature Q 1 19 (Date)									
Markene Walfram (Print)	By: Clayton Camori Managing Parkner (Agent)									
IF ADDITIONAL LANDOWNER										
Mary Sitzman 9-23-19 (Signature) (Date)										
11 arys -112 man	BUREAU OF WATER									
(Print)	2Eb 3 0 5010									
WWC-7 c/water well section/forms/ db 4/2016	BECEINED									