

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

Norma 18-1 20070368

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Stevens</u>		<u>SE</u> $\frac{1}{4}$ <u>SW</u> $\frac{1}{4}$ <u>SW</u> $\frac{1}{4}$	<u>18</u>	<u>T 35 S</u>	<u>R 37 E</u> <u>W</u>
Distance and direction from nearest town or city street address of well if located within city? <u>Optima, OK: N on Blacktop to Ks Stateline</u>			Global Positioning Systems (decimal degrees, min. of 4 digits)		
Latitude: <u>1.8 W .1 N and E into</u>			Longitude: _____		
Elevation: _____			Datum: _____		
Data Collection Method: _____					

2 WATER WELL OWNER:	EOG Resources Inc.
RR#, St. Address, Box # :	3817 NW Expressway Ste. 500
City, State, ZIP Code :	Okla. City, Ok 73112-1483

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

N

-- NW --	-- NE --
-- SW --	-- SE --
X	

W E

S

4 DEPTH OF COMPLETED WELL 360 ft.

Depth(s) Groundwater Encountered (1).....220..... ft. (2)..... ft. (3)..... ft.

WELL'S STATIC WATER LEVEL.....220..... ft. below land surface measured on mo/day/yr. 10-10-07

Pump test data: Well water was.....240..... ft. after.....1..... hours pumping.....100..... gpm

Est. Yield.....100..... gpm: Well water was..... ft. after..... hours pumping..... gpm

WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well

1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)

2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 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 X..... No

5 TYPE OF CASING USED:

1 Steel	3 RMP (SR)	5 Wrought Iron	8 Concrete tile	CASING JOINTS: Glued... <u>X</u> ... Clamped.....
<u>2</u> PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded.....
		7 Fiberglass		Threaded.....

Blank casing diameter6..... in. to280..... ft., Diameter. in. to ft., Diameter in. to ft.

Casing height above land surface.....24..... in., Weight.....4.074..... lbs./ft. Wall thickness or gauge No. SDR 21.316.....

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless Steel	5 Fiberglass	<u>7</u> PVC	9 ABS	11 Other (Specify)
2 Brass	4 Galvanized Steel	6 Concrete tile	8 RM (SR)	10 Asbestos-Cement	12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot	3 Mill slot	5 Gauzed wrapped	7 Torch cut	9 Drilled holes	11 None (open hole)
2 Louvered shutter	4 Key punched	6 Wire wrapped	<u>8</u> Saw Cut	10 Other (specify)	

SCREEN-PERFORATED INTERVALS: From.....280..... ft. to360..... ft., From ft. to ft.

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

GRAVEL PACK INTERVALS: From.....160..... ft. to360..... ft., From ft. to ft.

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

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other hole plug.....

Grout Intervals: From.....1..... ft. to25..... ft., From ft. to ft., From ft. to ft.

What is the nearest source of possible contamination:

1 Septic tank	4 Lateral lines	7 Pit privy	10 Livestock pens	13 Insecticide Storage	16 Other (specify below)
2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage	14 Abandoned water well	
3 Watertight sewer lines	6 Sumpage pit	9 Feedyard	12 Fertilizer Storage	<u>15</u> Oil well/gas well	

Direction from well? North How many feet? 200

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	Surface			
1	180	Sandy clay			
180	330	Sand			
330	345	Sand and clay streaks			
345	360	Sand			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 1 constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 10-10-07 and this record is true to the best of my knowledge and belief.

Kansas Water Well Contractor's License No. KWWCL430 This Water Well Record was completed on (mo/day/year) 10-10-07 under the business name of Howard Drilling Co B0x 806 Beaverby, Okla 73932

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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at <http://www.kdhe.state.ks.us/geo/waterwells>.