

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

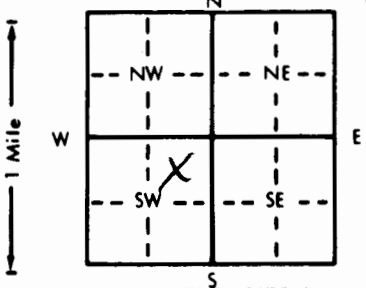
1 LOCATION OF WATER WELL: County: **PHILLIPS** Fraction: **SW 1/4 NE 1/4 SE 1/4** Section Number: **22** Township Number: **T 3 S** Range Number: **R 18 EW**

Distance and direction from nearest town or city street address of well if located within city?

HIGHWAY 183 NORTH

2 WATER WELL OWNER: **COFFEVILLE RESOURCES TERMINAL, LLC**
 RR#, St. Address, Box #: **HIGHWAY 183 NORTH** Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: **PHILLIPSBURG, KS 67661** Application Number:

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



4 DEPTH OF COMPLETED WELL: **50** ft. ELEVATION:
 Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.
 WELL'S STATIC WATER LEVEL: **39.7** ft. below land surface measured on mo/day/yr **6-22-05**
 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: **11** in. to **55** 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 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well **REMEDIAL**
 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 BLANK CASING USED: 1 Steel 2 **PVC** 3 RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below) CASING JOINTS: Glued Clamped
 Blank casing diameter in. to ft., Dia. in. to ft., Dia. in. to ft.
 Casing height above land surface: **36** in., weight **3.535** lbs./ft. Wall thickness or gauge No. **280**
 TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 6 Concrete tile 7 **PVC** 8 RMP (SR) 9 ABS 10 Asbestos-cement 11 Other (specify) 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 2 Louvered shutter 3 **Mill slot** 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 10 Other (specify) 11 None (open hole)

SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft., From ft. to ft.
 GRAVEL PACK INTERVALS: 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
 Grout Intervals: From ft. to 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) **UNKNOWN**
 Direction from well? **UNKNOWN** How many feet? **UNKNOWN**

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	DARK BROWN ORGANIC CLAY			
2	30	BROWN CLAY/SILT			
30	34	GREEN/GRAY SILTY SAND			
34	41	GREEN/GRAY TO BLACK SILTY SAND			
41	47	LT GRAY SILTY SAND			
47	49	GRAY FINE TO MED SAND			
49	54	BROWN TO DK BROWN CLAYEY SILT			
54	55	GREEN/GRAY SILT/SHALE			

B-114

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) **6-19-05** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **658** This Water Well Record was completed on (mo/day/yr) **8-1-05** under the business name of **BOART LONGYEAR** by (signature) *Nick Longyear*

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.