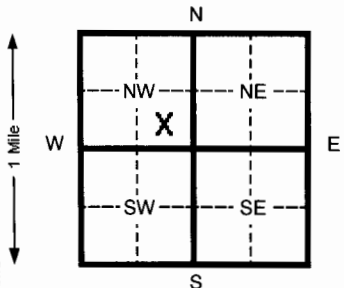


1 LOCATION OF WATER WELL: County: Decatur	Fraction S 1/2 1/4 SE 1/4 NW 1/4	Section Number 32	Township Number T 4 S	Range Number R 30 EW
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Distance and direction from nearest town or city street address of well if located within city?

2 WATER WELL OWNER: **Earl J. Brown**
 RR#, St. Address, Box # : **HC 1, Box 79**
 City, State, ZIP Code : **Selden, KS 67757**
 Board of Agriculture, Division of Water Resources
 Application Number: **20090015**

3 LOCATE WELL'S LOCATON WITH AN "X" IN SECTION BOX: 	4 DEPTH OF COMPLETED WELL 115 ft. ELEVATION: Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL NA 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 8 in. to 120 ft. and _____ in. to _____ ft. WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 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 _____
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5 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued **X** Clamped
 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____
 7 Fiberglass Threaded _____
 Blank casing diameter **4.5** in. to **75** ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface **18** in., weight **2.38** lbs./ft. Wall thickness or gauge No. **.248**
 TYPE OF SCREEN OR PERFORATION MATERIAL: 7 PVC 10 Asbestos-cement
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify)
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)
 SCREEN OR PERFORATION OPENINGS ARE:
 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes
 7 Torch cut 10 Other (specify) _____
 SCREEN-PERFORATED INTERVALS: From **75** ft. to **115** ft. From _____ ft. to _____ ft.
 From _____ ft. to _____ ft. From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From **20** ft. to **115** 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
 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 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/ Gas well
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)
 13 Insecticide storage **None**
 Direction from well? _____ How many feet? _____

FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2		Surface	82	100	Fine to some med sand w/clay & Caliche lenses
2	8		Loess			
8	18		Fine & med sand w/caliche Strks	100	108	Fine & med sand w/traces of clay
				108	120	Yellow ochre/black shale
18	25		Fine & med sand w/traces of Caliche			
25	31		Caliche w/sand strks & clay Lenses			
31	46		Fine sand & sandy clay w/ Caliche strks			
46	52		Caliche w/clay strks			
52	73		Fine sand w/caliche strks & Clay lenses			
73	82		Clay			

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/yr) **1/12/09** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **783** This Water Well Record was completed on (mo/day/yr) **1-19-09** under the business name of **Woofter Pump & Well Inc.** by (signature) *[Signature]*
 INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

Diagram on reverse

ers from a point 1/2 mile upstream to a point 1/2 mile
d. If additional space is needed, attach sheet.

the best of his/her knowledge.

1-12-09
Date



Murfin Drilling Company, Inc.
250 N. Water Suite #300
Wichita Kansas 67202
(316) 267-3241

WATER WELL

I STEVE BROWN hereby after this date 1-22 2009
Or (after Murfin Rig # 8 moves off (well name) BROWN "E" #1-32
Sec. 32T.4S R.30W. County DECATUR St. K
Takes all and full responsibilities of water well drilled on lease.

Drilled for the purpose of supplying Murfin Rig # 8 with water to drill
Above said lease.

SIGNED: Steve Brown
LAND OWNER

SIGNED: Bernard M-eye
MDC REPRESENTATIVE

Transferred

WATER RESOURCES RECEIVED

FO 3

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

JAN 15 2009

1142 PM

* -> GROUNDWATER
 SURFACE WATER
(check one)

KS DEPT OF AGRICULTURE

The State of Kansas
DATE 1/15/2009



A STATUTORY FILING FEE OF \$200.00 MUST ACCOMPANY THIS APPLICATION
(Make check payable to the Department of Agriculture)

20090015

1. Applicant (please print or type):
Name Murphy Drilling
Street Box 666
City and State Colby KS
Zip Code 67701 Telephone No. _____
Social Security I.D. No. _____
and/or Taxpayer I.D. No. _____

6. Location of place of use:
NW 1/4
32-4-30
Decatur
McCoy
Brown E 1-32

2. Location of Point of Diversion:
Sec. 32, Twp. 4, Rng. 30 (F) (W)
Decatur County, Kansas.

7. Period of use (6 months maximum):
Commencing date: 1-20-09
Ending date: 7-30-09

Distance from Southeast Corner of Section:
3070 feet North from Southeast Corner
3300 feet West from Southeast Corner

8. 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 = 100 feet
Each small square represents 10 acres

3. Water Use Data:
Proposed Max. Pumping Rate (gpm) 60
Amount Requested (gallons) 30000
(not to exceed one million gallons unless for dewatering)
* Depth of Well (feet) 115' OR
Name of Stream _____

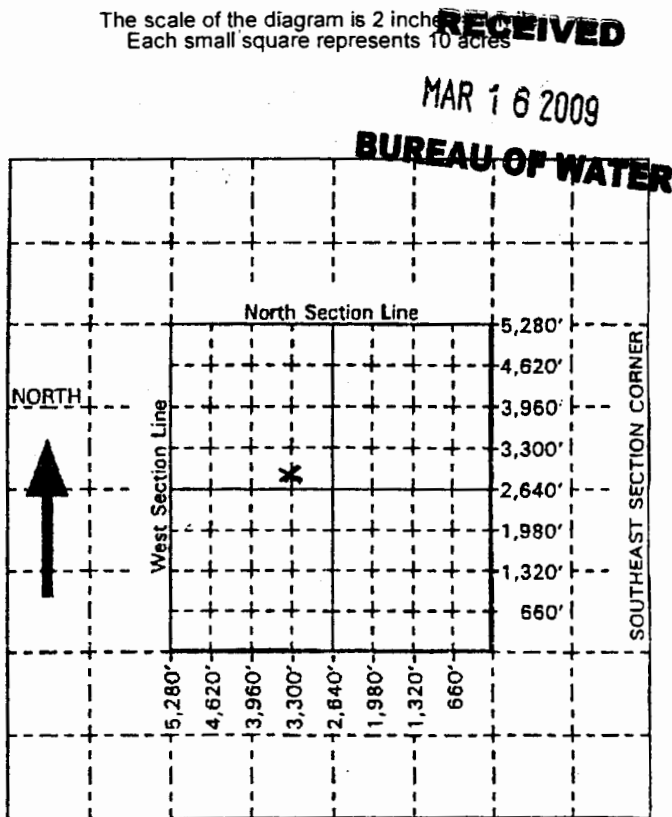
4. Name, address and phone number of the owner of land upon which point of diversion is located:

Earl J. Brown - HC 1 - Box 79
Selden KS 67257

If other than applicant, submit statement showing owners permission to install diversion works has been obtained (attach if applicable).
Oil & Gas Lease - Owner

5. Water is to be used for (briefly describe proposed use):

Water Supply Well
For Oil Field Drilling



MAR 16 2009

BUREAU OF WATER

For Office Use Only: Code TMP Fee \$200 ⁰⁰ TR # _____ Receipt Date 1-15-09 Check # 35559

* KAK/DWR per 91 309.

DWR 1-110 (Rev. 05-05-05)

Copy to McCoy, Landowner
State, Wichita, Colby File