

WATER WELL RE		11 11 C-3	20010		ion of Water		W 11 ID			
		e in Well Use			rces App. No.		Well ID	NY 1		
1 LOCATION OF WATER WELL:		Fraction	1/ 1/	Secti	on Number	Township Numb		ige Number		
County:	1/4 1/4	1/4 1/4	D	1 4 1 1 1	T S	R	□E □W			
					reet or Rural Address where well is located (if unknown, distance and					
Address:	direction from nearest town or intersection): If at owner's address, check here:							ineck nere:		
Address:										
City:	State:	ZIP:								
3 LOCATE WELL	4 DEPTH OF COM	IPI FTFD WFI I	•	ft	5 Letitud	n•		(desimal desmoss)		
WITH "X" IN										
	SECTION BOX: Depth(s) Groundwater Encountered: 1)									
WELL'S STATIC WATER LEVEL:										
	below land surface, measured on (mo-day-yr)					(unit make/model:)		
NW NE	☐ above land surface,	lay-yr)		· (WAAS enabled? ☐ Yes ☐ No)						
	Pump test data: Well w		☐ Land Survey ☐ Topographic Map							
W E	after hours			Online Mapper:						
X SW SE	Well w									
	after hours	gрш		6 Elevation :ft. ☐ Ground Level ☐ TOC						
Estimated Yield:gpm Bore Hole Diameter:in. to			ft and			☐ Land Survey ☐				
1 mile						Other				
7 WELL WATER TO I										
1. Domestic:		ter Supply: well ID			10. □ Oil F	ield Water Supply: 1	ease			
☐ Household		g: how many wells:				le: well ID				
☐ Lawn & Garden	7. 🗌 Aquifer Re				d Uncased					
☐ Livestock	8. Monitoring: well ID					mal: how many bore				
2. Irrigation	9. Environmental Remediation: well ID					ed Loop Horizon				
3. ☐ Feedlot					b) Open Loop ☐ Surface Discharge ☐ Inj. of Water 13. ☐ Other (specify):					
4. Industrial	☐ Recovery	☐ Injection								
Was a chemical/bacterio		itted to KDHE?	☐ Yes ☐	No]	If yes, date sa	ample was submitte	ed:			
Water well disinfected?										
8 TYPE OF CASING U										
Casing diameter in. to ft., Diameter ft., Diameter ft.										
Casing height above land surface										
TYPE OF SCREEN OR I			~			(0 :0)				
	ess Steel Fiber			n hala)		(Specify)	••••	• • • • • • • • • • • • • • • • • • • •		
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole) SCREEN OR PERFORATION OPENINGS ARE:										
Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)										
Louvered Shutter					ne (Open Hole			•••••		
SCREEN-PERFORATEI	SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft., From ft. to ft.									
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft. from ft.										
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other										
Grout Intervals: From										
Nearest source of possible contamination:										
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage										
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well								Well		
☐ Watertight Sewer Lines ☐ Other (Specify)				□F	ertilizer Storag	ge ☐ Oil We	ell/Gas Well			
Direction from well?		Distance from	 . well?			ft				
10 FROM TO	LITHOLOG		FRO			THO. LOG (cont.) o		GINTERVALS		
	LITTOLOG		T I I I		1.5		- 1 2 3 3 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	_ 11,1211,11110		
					Notes:					
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was \square constructed, \square reconstructed, or \square plugged										
under my jurisdiction and was completed on (mo-day-year)										
Kansas Water Well Contr	actor's License No	This	Water Wel	I Keco	rd was comp	leted on (mo-day-y	ear)			
under the business name (nd one copy to WATER W	FILOWNER and rate	ain one for vo	ur record	ds Fee of \$5 00	for each constructed w	<u></u> ell			
under the business name of										

KSA 82a-1212 Visit us at http://www.kdheks.gov/waterwell/index.html



ASSIGNMENT OF WATER WELL TO LANDOWNER

I, Dave Makings of P.O. Box 25
(Landowner's address)
<u>Kimberly Idaho 83341</u> am the landowner on which a water well is located in (City) (State) the <u>NW</u> quarter of the <u>SW</u> quarter of the <u>SW</u> quarter in Section <u>18</u> , Township <u>4</u> ,
Range 33 E/W, in Rawlins County, Kansas which is approximately
1100 feet north/south, and4950 feet east/west of the apparentSE section
corner. The water well was drilled in November 2014 (month/year).
I hereby request that Murfin Drilling Company leave the water well, (Operator name)
which was drilled by Temporary Water Permit #, 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: Dave Makinge 17 Mai 14 (Signature) Dave Makings By: (Date)
Dave Makings (Print) By: (Agent)
IF ADDITIONAL LANDOWNER RECEIVED
(Signature) (Date) NOV 2 5 2014
(Print) BUREAU OF WATER

WWC-7 R/Geology/WWC forms – standard/ db 10/25/2012