WATER WELL RECORD Form WWC-5 KSA 82a-1212 ID No. _____

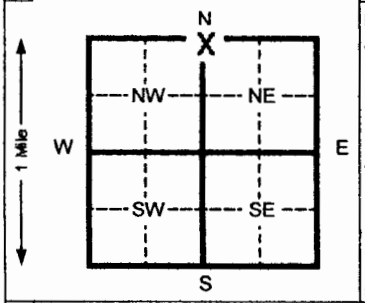
1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: **Decatur**	NE ¼ NE ¼ NW ¼	**16**	T **5** S	R **26** E (W)

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

2 WATER WELL OWNER: **Harold Unrein**
RR#, St. Address, Box # : **Rt. 1, Box 22**
City, State, ZIP Code : **Jennings, Ks**

Board of Agriculture, Division of Water Resources
Application Number: 2 C C 8 0 0 5 7

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



4 DEPTH OF COMPLETED WELL **195** 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 **195** 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

5 TYPE OF BLANK CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued **X** Clamped _____
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____
2 PVC 4 ABS 7 Fiberglass _____ Threaded _____

Blank casing diameter **X** in. to **155** 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: 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____

SCREEN-PERFORATED INTERVALS: From **155** ft. to **195** ft. From _____ ft. to _____ ft.
From _____ ft. to _____ ft. From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From **20** ft. to **195** 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	90	140	Fine to some med sand w/caliche
2	12		Loess			Lenses
12	16		Clay	140	155	Clay & caliche w/traces of sand
16	24		Fine to some med sand	155	170	Clay & caliche w/sand strks
24	27		Sandstone w/fine sandstrks	170	190	Fine to med sand w/clay & caliche
27	31		Clay & caliche w/traces of sand	190	195	Yellow ochre
31	36		Fine to med sd w/traces of clay			
36	45		Sandstone w/caliche strks &			
			Clay lenses			
45	50		Fine sand w/caliche lenses			
50	65		Sandstone & fine sand strks			
			w/caliche lenses			
65	90		Fine to some med sand w/			
			Caliche strks			

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) 2-15-08 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 554 This Water Well Record was completed on (mo/day/yr) 2-15-08 under the business name of **Woofter Pump & Well Inc.** by (signature) Gary L. Woofter

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.

OFFICE USE ONLY T R SEC

MURFIN

WICHITA, KANSAS

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

WATER WELL

X I Harold Unruh hereby after this date 2-12-08 20 08
Or (after Murfin Rig # 16 **moves off (well name)** UNRUH UNIT 1-16
Sec. 16 **T.** 5 **R.** 26 **. County** Decatur **St.** KS
Takes all and full responsibilities of water well drilled on lease.

Drilled for the purpose of supplying Murfin Rig # 16 **with water to drill Above said lease.**

X **SIGNED:** H. L. Unruh
LAND OWNER

SIGNED: [signature]
MDC REPRESENTATIVE

Transferred

FO 3
GMD 0
MEETS
K.A.R. 5-9
BY LI
DATE 2/8/08

Submit 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

☑ GROUNDWATER
☐ SURFACE WATER
(check one)

The State of Kansas

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

20080057

1. Applicant (please print or type):
   Name Mullin Drilling Co.
   Street PO Box 1161
   City and State Colby KS
   Zip Code 67701 Telephone No
   Social Security I.D. No.
   and/or Taxpayer I.D. No.

2. Location of Point of Diversion:
   Sec. 16, Twp. 5, Rng. 26 (W)
   Decatur County, Kansas.
   Distance from Southeast Corner of Section:
   4950 feet North from Southeast Corner
   2680 feet West from Southeast Corner
   Existing water right? Yes ☐ No ☑ If yes, File No.
   Pending application? Yes ☐ No ☑ If yes, File No.

3. Water Use Data:
   Proposed Max. Pumping Rate (gpm) 60
   Amount Requested (gallons) 300000
   (not to exceed one million gallons unless for dewatering)
   Depth of Well (feet) 190', OR
   Name of Stream

4. Name, address and phone number of the owner of land upon which point of diversion is located:
   Harold Unrein
   Rt 1 Box 22 Jennings KS
   If other than applicant, submit statement showing owner's permission to install diversion works has been obtained (attach if applicable). Oil + gas lease owner grants permission

5. Water is to be used for (briefly describe proposed use):
   Water supply well for oil field drilling

6. Location of place of use:
   NE 1/4
   16-5-26W
   Decatur Co.
   Unrein Unit 1-16
   R.g16

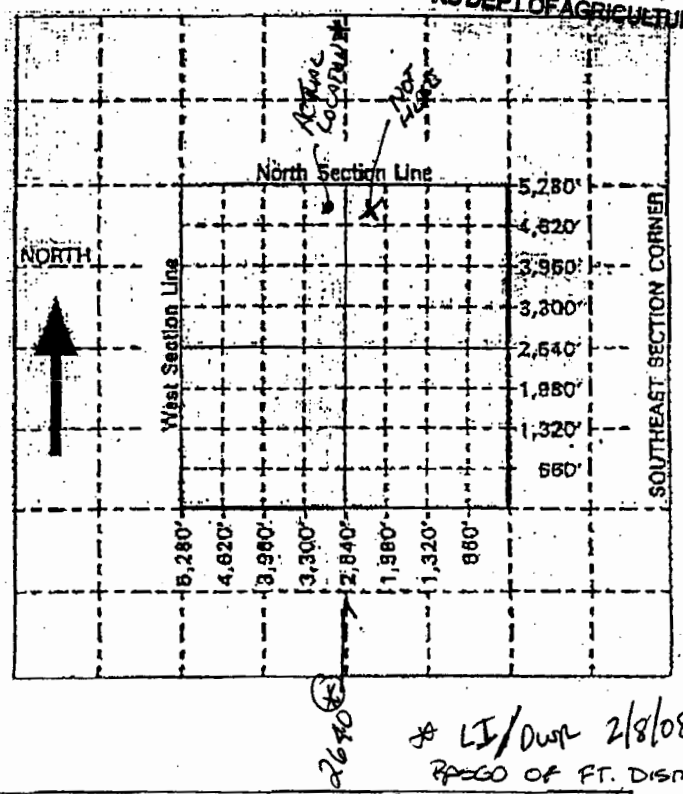
7. Period of use (6 months maximum):
   Commencing date: 2-14-08
   Ending date: 8-14-08

8. 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.

RECEIVED
MAR 10 2008
BUREAU OF WATER

WATER RESOURCES RECEIVED
FEB 08 2008
12:28pm
KS DEPT OF AGRICULTURE

The scale of the diagram is 2 inches = 1 mile
Each small square represents 10 acres



LI/DWR 2/8/08
Recd of Ft. Distances

For Office Use Only: Code TMP Fee $ 200 TR # Receipt Date 2-8-08 Check # 33675

DWR 1-110 (Rev. 01-05-05)

Copy To State Landowner Water Well