

1 LOCATION OF WATER WELL:		Fraction	Section Number		Township Number		Range Number	
County: Decatur		NW $\frac{1}{4}$ SW $\frac{1}{4}$ NE $\frac{1}{4}$	32		T 5 S		R 29 EW	
Distance and direction from nearest town or city street address of well if located within city?								
2 WATER WELL OWNER: Rick & Tami Shaw								
RR#, St. Address, Box # : Rt 2, Box 153								
City, State, ZIP Code : Selden, KS 67757								
Board of Agriculture, Division of Water Resources Application Number: 20090034								
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 120 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 118 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:								
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 80 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:								
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement								
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify) _____								
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 80 ft. to 120 ft. From _____ ft. to _____ ft.								
GRAVEL PACK INTERVALS: From 20 ft. to 120 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) None								
13 Insecticide storage								
Direction from well? _____ How many feet? _____								
FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS		
0	2		Surface					
2	10		Loess					
10	25		Fine sand					
25	38		Fine to med sand					
38	48		Caliche & sandstone str					
48	55		Clay & caliche w/sandstone					
55	66		Fine sand w/clay str					
66	72		Sandstone					
72	79		Clay w/a few sand str					
79	86		Sandstone w/clay str					
86	99		Fine to some med sand					
99	116		Fine & med sand					
116	118		Yellow ochre					
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) 1/28/09 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) 2-3-09								
under the business name of Woofor Pump & Well Inc. by (signature) <i>[Signature]</i>								
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 Drilling Company, Inc.
250 N. Water Suite #300
Wichita Kansas 67202
(316) 267-3241

WATER WELL

I RICK SHAW hereby after this date 1-30 2009
Or (after Murfin Rig # moves off (well name) R+T SHAW # 1-32
Sec. 32 T. 55 R. 29W County DECATUR St. KS
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: Rick Shaw
LAND OWNER

SIGNED: Bernard Meyn
MDC REPRESENTATIVE



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)

Transferred
WATER RESOURCES
RECEIVED

JAN 30 2009

KS DEPT OF AGRICULTURE



The State of Kansas

DATE 1/30/20

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

20090034

1. Applicant (please print or type):

Name Martin Drilling
Street Box 161
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:

Ne 14
32-5-29 W
Decatur County
Martin Rig 8
R+T Shaw 1-32

2. Location of Point of Diversion:

Sec. 32, Twp. 5, Rng. 29 (E) (W)
Decatur County, Kansas.

Distance from Southeast Corner of Section:

3780 feet North from Southeast Corner
2310 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) 121' OR
Name of Stream

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

Rick + Tami Shaw: R+2 Box 153
Selden KS 67757

If other than applicant, submit statement showing 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

7. Period of use (6 months maximum):

Commencing date: 2-4-09
Ending date: 8-4-09

8. Location of the proposed point of diversion shall be indicated on the diagram below. Use the center section.

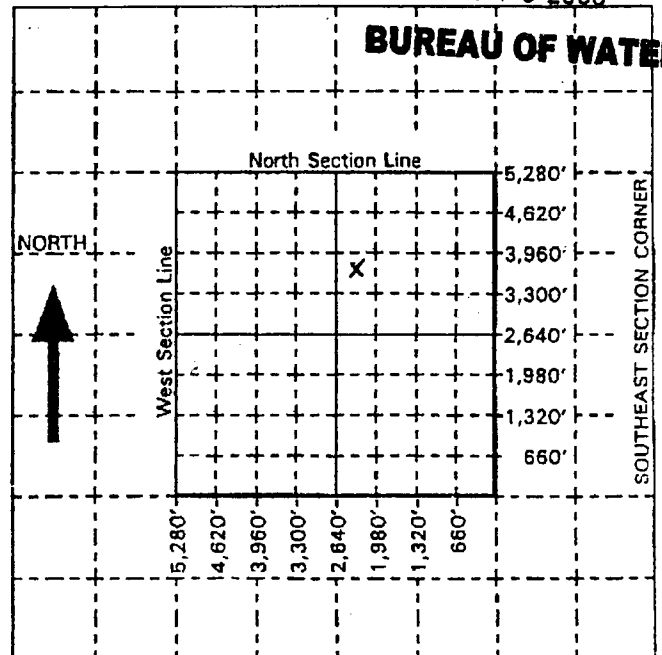
If surface water, indicate on the diagram the course of the stream, and its name.

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

RECEIVED

MAR 16 2009

BUREAU OF WATER

For Office Use Only: Code TMP Fee \$ 200 TR # Receipt Date 1-30-09 Check # 35630

Copy To Wichita, Landowner
Woofter, State, Colby File, John T.