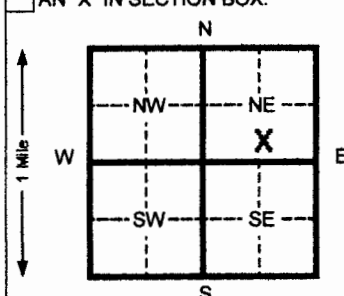


1 LOCATION OF WATER WELL: Fraction **SW 1/4 SE 1/4 NE 1/4** Section Number **23** Township Number **T 5 S** Range Number **R 30 EW**
 County: **Decatur**

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

Murfin Drilling
 2 WATER WELL OWNER: **W & W Farms**
 RR#, St. Address, Box #: **% George Wessel** Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: **R R 2, Box 62, Selden, Ks 6775** Application Number: **20070395**

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

 4 DEPTH OF COMPLETED WELL **100** 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 **100** 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 **100** ft. From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From **20** ft. to **100** 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 11 Fuel storage 14 Abandoned water well
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 15 Oil well/ Gas well
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage 16 Other (specify below) **none**

Direction from well? _____ How many feet? _____

FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2		Surface			
2	8		Loess			
8	16		Clay			
16	27		Fine to med sand w/clay strks			
27	31		Caliche			
31	42		Sandstone			
42	51		Fine to some med sd w/sand-stone strks			
51	67		Fine to some med sd w/clay & Caliche strks			
67	80		Fine to med sd w/small gravel			
80	92		Fine to med sand (loose)			
92	100		Yellow ochre/black shale			

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) **10-8-07** 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) **10-9-07** under the business name of **Woofter Pump & Well Inc.** by (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 66612-1387. Telephone: 913-298-5545. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY

T

R

SEC

Anna 1-23



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

WATER WELL

I Fred Wessel hereby after this date 10-18-07 20
Or (after Murfin Rig # 8 moves off (well name) Anna 1-23
Sec. 23 T. 5s R. 30w. County Decatur St. KS
Takes all and full responsibilities of water well drilled on lease.

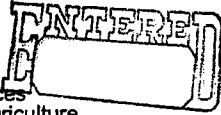
Drilled for the purpose of supplying Murfin Rig # 8 with water to drill
Above said lease.

SIGNED: Fred Wessel Tutor
LAND OWNER

SIGNED: Bernard Meyer
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)

WATER RESOURCES
RECEIVED

OCT 03 2007
12:25 PM
KS DEPT OF AGRICULTURE



Transferred
3
GMD 4
MEETS
K.A.R. 6-9-1
BY LF
DATE 10/3/07

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

20070375

1. Applicant (please print or type):
Name Murfin Drilling
Street Box 661 S
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:
SW - SE - NE
23 - 5 - 30
Deeatur
Anna 1-23
R. 8

7. Period of use (6 months maximum):
Commencing date: 10-8-07
Ending date: 4-8-08

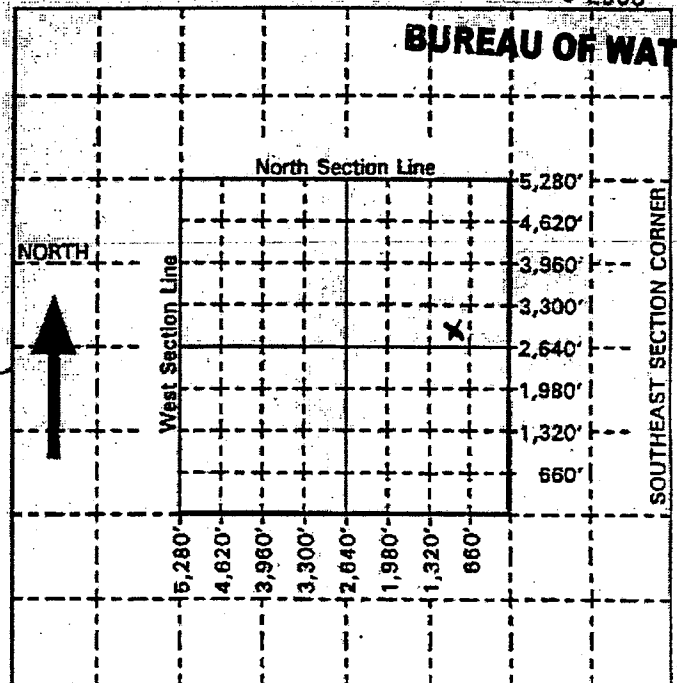
8. Location of the proposed point of diversion shall be indicated on the diagram below. Use the center section.
If surface water, indicate on the diagram the course of the stream, and its name.

The scale of the diagram is 2 inches = 100 feet
Each small square represents 10 acres

RECEIVED

MAR 16 2009

BUREAU OF WATER



2. Location of Point of Diversion:
Sec. 23, Twp. 5, Rng. 30 ^(E)/_(W)
Deeatur County, Kansas.

Distance from Southeast Corner of Section:
2730 feet North from Southeast Corner
990 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) 150 (est), OR
Name of Stream _____

4. Name, address and phone number of the owner of land upon which point of diversion is located:
W & W Farms, % George Wessel - R2-Box 62
Selden KS 67757

If other than applicant, submit statement showing owner's 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):
Grant Permission
Water Supply Well for Oil
Field Drilling

For Office Use Only: Code TMP Fee \$ 200 TR # _____ Receipt Date 10-3-07 Check # 33058

Copy to State, Landowner, Woofter