135 8578 TW11-07

WATER WELL RECORD

Form WWC-5 Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: Cloud | Fraction: SE 1/4 SW 1/4 NE 1/4 | Section Number: 15 | Township Number: T 6 S | Range Number: R 2 E (W)

Distance and direction from nearest town or city street address of well if located within city? Approximately 1 3/4 miles south and 7 1/4 miles east of Concordia

Global Positioning Systems (decimal degrees, min. of 4 digits)
Latitude: 39.533756
Longitude: -97.52211
Elevation: Unknown
Datum: NAD83
Data Collection Method: WAAS GPS Unit

2 WATER WELL OWNER: Everton Energy LLC
RR#, St. Address, Box # : 1020 E. 19th Street North
City, State, ZIP Code : Wichita, KS 67214

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

N / W / E / S; --NW-- --NE-- --SW-- --SE-- (X in NE)

4 DEPTH OF COMPLETED WELL 160 ft.

Depth(s) Groundwater Encountered (1) ..... ft. (2) ..... ft. (3) ..... ft,

WELL'S STATIC WATER LEVEL 35.57 ft. below land surface measured on mo/day/yr 03-13-07

Pump test data: Well water was Not checked ft. after ..... hours pumping ..... gpm

Est. Yield Unknown gpm: Well water was ..... ft. after ..... hours pumping ..... gpm

WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well; 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering (12) Other (Specify below); 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well — Test Well

Was a chemical/bacteriological sample submitted to Department? Yes ..... No ✓ If yes, mo/day/yrs

Sample was submitted ..... Water well disinfected? Yes ..... No ✓

5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile; 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below); (2) PVC 4 ABS 7 Fiberglass

CASING JOINTS: Glued ✓ Clamped ..... Welded ..... Threaded .....

Blank casing diameter 5 in. to 98 ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.

Casing height above land surface 24 in., weight 2.36 lbs./ft. Wall thickness or gauge No. .214

TYPE OF SCREEN OR PERFORATION MATERIAL:
1 Steel 3 Stainless Steel 5 Fiberglass (7) PVC 9 ABS 11 Other (Specify) .....
2 Brass 4 Galvanized Steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:
1 Continuous slot (3) Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)
2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (Specify) .....

SCREEN-PERFORATED INTERVALS: From 98 ft. to 158 ft., From ..... ft. to ..... ft.
From ..... ft. to ..... ft., From ..... ft. to ..... ft.

GRAVEL PACK INTERVALS: From 64 ft. to 170 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 Bentonite Holeplug

Grout Intervals: From ..... ft. to ..... ft., From ..... ft. to ..... ft., From 0 ft. to 64 ft.

What is the nearest source of possible contamination:
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage (16) Other (specify below) None known
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well
Direction from well? ..... How many feet? .....

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Topsoil			
3	8	Clay, gray, hard			
8	27	Clay, brown, hard			
27	33	Sandstone, with drift gravel, medium to fine			
33	38	Clay, red and white, hard, with sandstone			
		streaks			
38	44	Clay, yellow and gray, hard, with sandstone			
		streaks			
44	50	Clay, red and gray, hard			
50	162	Sandstone, tan color, soft			
162	180	Clay, gray, hard, with streaks of shale			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed (2) reconstructed (3) plugged under my jurisdiction and was completed on (mo/day/year) 03-13-07 and this record is true to the best of my knowledge and belief.

Kansas Water Well Contractor's License No. 185 This Water Well Record was completed on (mo/day/year) 3-15-07

Under the business name of Clarke Well & Equipment, Inc. by (signature) [signature]

INSTRUCTIONS: Use typewriter or ball point pen. *PLEASE PRESS FIRMLY* and *PRINT* clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of $5.00 for each constructed well.