

| WATER WELL RI | | ** ** C-3 | | | on of Water | | W 11 ID | | |
|--|--|------------------|----------------|---------------------------------------|--|--------------------------|-------------------|-----------------|--|
| | | ge in Well Use | | | rces App. No. | T 1: N 1 | Well ID | NY 1 | |
| 1 LOCATION OF WATER WELL: | | Fraction | | Section | on Number | Township Numb | | ige Number | |
| County: | | 4 1/4 | D1 | 1 A 1.1 1 | T S | R | □E □W | | |
| 2 WELL OWNER: La Business: | st Name: | First: | · · | | | | | | |
| Address: | direction from nearest town or intersection): If at owner's address, check here: | | | | | | | meck nere: | |
| Address: | | | | | | | | | |
| City: | State: | ZIP: | | | | | | | |
| 3 LOCATE WELL | | ft | 5 Letitud | ·· | | (daaimal daamaa) | | | |
| WITH "X" IN | Depth(s) Groundwater | | 11. | · · · · · · · · · · · · · · · · · · · | | | | | |
| SECTION BOX: | ON BOA: $\begin{array}{c} 1 \\ 2 \\ \end{array}$ ft or $\begin{array}{c} 4 \\ \end{array}$ | | | | | | | | |
| N | WELL'S STATIC WATER LEVEL: | | | | | | | | |
| | □ below land surface, measured on (mo-day-y | | | | ····· GPS (unit make/model:) | | | | |
| NW NE | above land surface, measured on (mo-da | | | |)(WAAS enabled? ☐ Yes ☐ No) | | | | |
| 🗸 | Pump test data: Well water was ft | | | | ☐ Land Survey ☐ Topographic Map | | | | |
| W ^ E | after hours | | Online Mapper: | | | | | | |
| SW SE | Well w | | | | | | | | |
| | after hours pumping gp Estimated Yield:gpm | | | 6 Elevation:ft. ☐ Ground Level ☐ TOC | | | | | |
| S | Bore Hole Diameter: | ft and | | | | | | | |
| mile | Bote Hole Diameter | | Other | | | | | | |
| 7 WELL WATER TO BE USED AS: | | | | | | | | | |
| 1. Domestic: 5. Public Water Supply: well ID | | | | | | | | | |
| ☐ Household | 6. ☐ Dewaterin | | | | | | | | |
| ☐ Lawn & Garden | 7. ☐ Aquifer R | | | ☐ Case | d Uncased | Geotechnica ¹ | 1 | | |
| ☐ Livestock | 8. Monitorin | | | | | | | | |
| 2. Irrigation | 9. Environmenta | | •••• | | | | | | |
| 3. Feedlot | ☐ Air Sparge ☐ Soil Vapor Extr | | | | b) Open Loop ☐ Surface Discharge ☐ Inj. of Water | | | | |
| 4. Industrial | Recovery | ☐ Injection | | | | (specify): | | | |
| Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted: | | | | | | | | | |
| Water well disinfected? ☐ Yes ☐ No | | | | | | | | | |
| 8 TYPE OF CASING USED: Steel PVC Other | | | | | | | | | |
| Casing diameter in. to ft., Diameter ft., Diameter ft. | | | | | | | | | |
| Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No | | | | | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | | | | | | | | |
| ☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (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 □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole) | | | | | | | | | |
| SCREEN-PERFORATED INTERVALS: From | | | | | | | | | |
| GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft., From ft. to ft. | | | | | | | | | |
| 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other | | | | | | | | | |
| Grout Intervals: From | | | | | | | | | |
| Nearest source of possible contamination: | | | | | | | | | |
| ☐ Septic Tank | Lateral Line | | | | vestock Pens | | cide Storage | | |
| ☐ Sewer Lines | Cess Pool | ☐ Sewage L | | | iel Storage | | oned Water V | Well | |
| □ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify) □ Oil Well/Gas Well | | | | | | | | | |
| Direction from well? | | Distance from v | vell? | | | ft | - | | |
| 10 FROM TO | LITHOLOG | | FROM | | | THO. LOG (cont.) o | | GINTERVALS | |
| | LIIIOLO | | IRON | _ | | 200 (cont.) 0 | - 1 2 3 3 3 1 1 1 | _ 11,1211,11110 | |
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| | Notes: | | | | | - ' | | | |
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| | | | | | | | | | |
| 11 CONTRACTOR'S | OR LANDOWNER'S | S CERTIFICATIO | N: This w | ater v | well was 🔲 | constructed, rec | onstructed, | or plugged | |
| under my jurisdiction and was completed on (mo-day-year) | | | | | | | | | |
| Kansas Water Well Cont | tractor's License No | This W | ater Well | Kecor | ra was comp | ieted on (mo-day-y | ear) | ••••• | |
| under the business name of Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. | | | | | | | | | |
| KS Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-3565. | | | | | | | | | |

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

H & C OIL OPERATING, INC. P.O. Box 86 Plainville, KS 67663 785-434-7434 Phone/785-688-4200 Fax

Water Well

I, <u>John Goddard</u>, hereby after this date, <u>March 1, 2013</u> or after H & C Oil Operating, Inc. moves off <u>Longsmith #27-1</u> located in <u>NW/4</u>

Sec. 27 <u>T. 7S R. 24W</u>, <u>Graham</u> County, State of <u>Kansas</u> takes all and full responsibilities of water well drilled in the NW/4 Sec. 27, T7S, R24W.

Drilled for the purpose of supplying H & C Oil Operating, Inc. with water to drill above said lease.

Signed:

John Goddard Goddard Farms

Signed:

Charles R. Ramsay

H & C Oil Operating Representative

MAR 1 8 2013
BUREAU OF WATER