

WATER WELL RI		** ** C-3	20990		ion of Water		W 11 ID			
		ge in Well Use			rces App. No.		Well ID	NY 1		
1 LOCATION OF WA	Fraction	1/ 1/	Secti	on Number	Township Numb		ige Number			
County:			1/4 1/4	. D	1 4 1 1 1	T S	R	□E □W		
2 WELL OWNER: La Business:	st Name:	First:		t or Rural Address where well is located (if unknown, distance and						
Address:	direction from nearest town or intersection): If at owner's address, check here:							ineck nere:		
Address:										
City:	State:	ZIP:								
3 LOCATE WELL	4 DEPTH OF COM	PI FTFD WFI I	•	ft	5 I offind	0.		(daaimal daamaa)		
WITH "X" IN	Depth(s) Groundwater I									
SECTION BOX:	2) ft. 3									
N	WELL'S STATIC WA									
	☐ below land surface,				(unit make/model:)			
NW NE	above land surface,	ay-yr)		(WAAS enabled? ☐ Yes ☐ No)						
	_	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map				
W E		s pumping			Online Mapper:					
SW SE		vater was								
1 1 , 1 , 1	after hours Estimated Yield:	gpm	6 Elevation:ft. ☐ Ground Level ☐ TOC							
$\begin{bmatrix} & & & & & & & & & & & & & & & & & & &$	Bore Hole Diameter:		ft and							
mile		in. to								
7 WELL WATER TO					L					
1. Domestic:		ter Supply: well ID.			10. □ Oil F	ield Water Supply: 1	ease			
☐ Household		g: how many wells?				le: well ID				
☐ Lawn & Garden		echarge: well ID			☐ Case	d Uncased	Geotechnica	1		
☐ Livestock	8. Monitoring				mal: how many bore					
2. Irrigation	9. Environmental Remediation: well ID.					ed Loop 🔲 Horizon				
3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor E			or Extraction							
4. 🗌 Industrial	Recovery	☐ Injection			13. ∐ Othe	r (specify):				
Was a chemical/bacteri		itted to KDHE? [☐ Yes ☐	No]	If yes, date s	ample was submitte	ed:			
Water well disinfected?										
8 TYPE OF CASING										
	Casing diameter in. to ft., Diameter ft., Diameter ft.									
Casing height above land surface										
TYPE OF SCREEN OR						(0 10)				
☐ 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)										
	☐ Key Punched ☐ W				ne (Open Hole		• • • • • • • • • • • • • • • • • • • •			
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft., From ft. to ft.										
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft., From ft. o ft.										
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other										
Grout Intervals: From										
Nearest source of possible contamination:										
☐ Septic Tank										
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well								Well		
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify) □ Oil Well/Gas Well										
Direction from well?		Distance from	 wali9			fe				
10 FROM TO	LITHOLOG		FRO			THO. LOG (cont.) o		GINTERVALS		
10 110111	EITHOLOG	SIC LOG	TRO	141	TO E	THO. LOG (cont.) o	TTECOOIT	SHVIERVILD		
					Notes:					
11 CONTRACTOR'S	OR LANDOWNER'S	S CERTIFICATION	ON: This	water v	well was 🔲	constructed, rec	onstructed,	or plugged		
under my jurisdiction an	d was completed on (m	no-day-year)		and th	nis record is t	rue to the best of m	ny knowleda	ge and belief.		
Kansas Water Well Cont	ractor's License No	This \	water Wel	i Keco	rd was comp	ieted on (mo-day-y	ear)	•••••		
under the business halle	end one copy to WATER W	ELL OWNER and retai	in one for vo	ır record	ds. Fee of \$5.00) for each constructed w	ell.	•••••		
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



R/Geology/WWC forms – standard/ db 10/25/2012

ASSIGNMENT OF WATER WELL TO LANDOWNER

l, Harry Jos	e Prattof	P.O. Box 275
•		P.O. Box 275 (Landowner's address)
Hoxie	Kansas am	the landowner on which a water well is located in
the SE quar	ter of the SE quarter of the	SE quarter in Section 31, Township 7,
	/ 1	County, Kansas which is approximately
feet	north/south, and 316	feet east west of the apparent SE section
corner. The wa	ater well was drilled in <u>Nover</u>	mber 2014 (month/year).
I hereby reques	st that Cobalt Ene	rgy leave the water well,
	(Operato	r name)
which was dri	lled by Temporary Water Per	rmit #, unplugged, and I will
assume all resp	onsibility for the plugging of s	aid water well in accordance with the requirements
of the Kansas I	Department of Health and Envir	ronment regulation K.A.R. 28-30-7.
LANDOWNER OPAL DAVIS Signature	R: Testamentary Tavs? Protes (Date)	OPERATOR: (Signature) (Dage)
(Print)	TRUSTER	By:(Agent)
IF ADDITION	AL LANDOWNER	
		RECEIVED
(Signature)	(Date)	NOV 2 5 2014
(Print)		BUREAU OF WATE