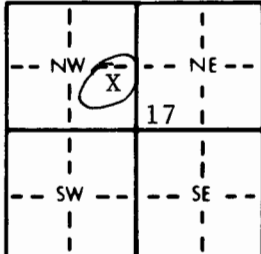


1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Johnson</u>		<u>NE 1/4</u> <u>SE 1/4</u> <u>NW 1/4</u>	<u>17</u>	<u>T 13 S</u>	<u>R 22 E</u>
Distance and direction from nearest town or city street address of well if located within city? <u>1 mile south of Clear view City, KS.</u>					
2 WATER WELL OWNER: Sunflower Army Ammunition Plant					
RR#, St. Address, Box # : <u>DeSoto, Kansas 66018</u>		p.o. box <u>549</u>		Board of Agriculture, Division of Water Resources	
City, State, ZIP Code : <u>Well No. MW 81-43</u>		<u>35425 w. 103rd ST</u>		Application Number:	
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>70.0</u> ft. ELEVATION: <u>906.26</u> ft.			
		Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.			
		WELL'S STATIC WATER LEVEL <u>10.5</u> ft. below land surface measured on mo/day/yr <u>8-17-95</u>			
		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 <u>8</u> in. to ft., and in. to ft.			
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 Lawn and garden only <u>10 Monitoring well</u> <u>X</u>					
Was a chemical/bacteriological sample submitted to Department? Yes..... No.....; If yes, mo/day/yr sample was sub- mitted					
Water Well Disinfected? Yes..... No.....					
5 TYPE OF BLANK CASING USED:					
1 Steel		5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued..... Clamped.....	
<u>2 PVC</u> <u>X</u>		3 RMP (SR)	6 Asbestos-Cement	Welded.....	
4 ABS		7 Fiberglass	9 Other (specify below)	Threaded.....	
Blank casing diameter <u>4</u> in. to ft., Dia. in. to ft., Dia. in. to ft.					
Casing height above land surface in., weight lbs./ft. Wall thickness or gauge No.					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel		3 Stainless steel	5 Fiberglass	10 Asbestos-cement	
2 Brass		4 Galvanized steel	6 Concrete tile	11 Other (specify).....	
			9 ABS	12 None used (open hole)	
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot		5 Gauzed wrapped	8 Saw cut	11 None (open hole)	
<u>3 Mill slot</u> <u>X</u>		6 Wire wrapped	9 Drilled holes		
2 Louvered shutter		7 Torch cut	10 Other (specify).....		
SCREEN-PERFORATED INTERVALS: From <u>6.0</u> ft. to <u>69.0</u> ft. From ft. to ft.					
From ft. to ft. From ft. to ft.					
GRAVEL PACK INTERVALS: From <u>3.5</u> ft. to <u>70.0</u> ft. From ft. to ft.					
From ft. to ft. From ft. to ft.					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite <u>X</u> Other <u>microfine cement</u>					
Grout intervals: From <u>3.0</u> ft. to ft., From <u>70.0</u> 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	
2 Sewer lines		5 Cess pool	8 Sewage lagoon	11 Fuel storage	
3 Watertight sewer lines		6 Seepage pit	9 Feedyard	12 Fertilizer storage	
				13 Insecticide storage	
				14 Abandoned water well	
				15 Oil well/Gas well	
				<u>16 Other (specify below)</u>	
				Settling Pond A	
Direction from well? <u>south</u> How many feet? <u>200</u>					
FROM	TO	LITHOLOGIC LOG		FROM	TO
				0.0	3.0
				3.0	70.0
				clay soil - tamped	
				Well abandoned by staged pressure grouting with ADDIMENT-MICROCEM microfine cement. A packer was placed approx. 10' above the well bottom, 12 to 25 gallons of grout pumped at up to 50psi. The packer was then moved up 10', another 12 to 25 gallons of grout were pumped at up to 50 psi. The procedure was repeated until the entire well annulus and casing were filled to the surface with grout. All surface features were removed, the well excavated to 3', the casing cut off, and the hole backfilled with clay soil and tamped. Calculated grout volume = 87.0 gals	
		CF: KDHE, Bur. of Water		Actual grout take = 88.0 gals	
		SFAAP			
		USACE-MRK-EP-GG			
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/year) <u>8-17-95</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo/day/yr) <u>9-29-95</u> under the business name of <u>US ARMY CORPS OF ENGINEERS</u> by (signature) <u>James J. Hirsch</u>					
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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					