WATER WELL RECORD Form WWC-5 KSA 82a-1212 WELL #43MW004

1 LOCATION OF WATER WELL:

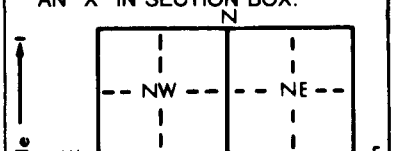
County:	Fraction	Section Number	Township Number	Range Number
JOHNSON	NW ¼ NE ¼ SE ¼	24	T 13 S	R 22 (E) W

Distance and direction from nearest town or city street address of well if located within city?
2 MILES SW OF DESOTO, KS

2 WATER WELL OWNER: US ARMY SUNFLOWER ARMY AMMUNITION PLANT
RR#, St. Address, Box # : PO BOX 640, 35425 W 103rd ST
City, State, ZIP Code : DE SOTO, KS 66018

Board of Agriculture, Division of Water Resources
Application Number:

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



4 DEPTH OF COMPLETED WELL 27.0 ft. ELEVATION: 903.2

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

WELL'S STATIC WATER LEVEL 19.39 ft. below land surface measured on mo/day/yr 11-13-95

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 10 in. to 27 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 (10) Monitoring well

Was a chemical/bacteriological sample submitted to Department? Yes ..... (No) ..... ; If yes, mo/day/yr sample was submitted

Water Well Disinfected? Yes No X

5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued ..... Clamped .....
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded .....
(2) PVC 4 ABS 7 Fiberglass Threaded X

Blank casing diameter 2 in. to 16.38 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.

Casing height above land surface 39.8 in., weight 0.70 lbs./ft. Wall thickness or gauge No. SCH. 40

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

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

SCREEN-PERFORATED INTERVALS: From 16.38 ft. to 26.38 ft., From ..... ft. to ..... ft.
From ..... ft. to ..... ft., From ..... ft. to ..... ft.

GRAVEL PACK INTERVALS: From 13.5 ft. to 27 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 .....

Grout Intervals: From 0 ft. to 11.5 ft., From 11.5 ft. to 13.5 ft., From ..... ft. to ..... ft.

What is the nearest source of possible contamination: 10 Livestock pens 14 Abandoned water well
1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well
2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage (16) Other (specify below)
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage SWMU

Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	9	SILTY CLAY			
9	11	SANDY CLAY			
11	23	MED-FINE SAND w/ TRACE CLAY			
23	27	MED SAND			

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) 09/28/95 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 102 This Water Well Record was completed on (mo/day/yr) 03/13/96 under the business name of LAYNE, 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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

FOR USE ONLY