

USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

Kansas Department of Health and Environment-Division of Environment (Water well Contractors) Topeka, Kansas 66620

1. Location of well:		County Lyon	Fraction NW 1/4 SW 1/4 SW 1/4	Section number 17	Township number T 19 S R 11 E/R	Range number
2. Distance and direction from nearest town or city: SW Edge of Emporia, Kansas Street address of well location if in city:				3. Owner of well: Iowa Beef Processors, Inc. R.R. or street: Dakota City, Nebr. 68731 City, state, zip code:		
4. Locate with "X" in section below: N W E S 1 Mile Well No. 15				6. Bore hole dia. <u>1 1/2</u> in. Completion date _____ Well depth <u>40</u> ft. <u>11/6/76</u>		
5. Type and color of material				7. <input type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary		
Top soil				8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input checked="" type="checkbox"/> Other		
Clay				9. Casing: Material _____ Height: Above <input checked="" type="checkbox"/> Below _____ Threaded _____ Welded _____ Surface <u>18</u> in. RMP _____ PVC <input checked="" type="checkbox"/> Weight _____ lbs./ft. Dia. <u>4</u> in. to <u>40</u> ft. depth, Wall Thickness: inches or _____ Dia. _____ in. to _____ ft. depth, Gauge No. <u>Class 160</u>		
Large gravel, rocks, flat & round stones				10. Screen: Manufacturer's name _____ Type <u>PVC</u> Dia. <u>4"</u> Slot/gauze <u>1/8"</u> Length <u>9'</u> Set between <u>25</u> ft. and <u>30</u> ft. <u>36</u> ft. and <u>40</u> ft. Gravel pack? <u>yes</u> Size range of material <u>1/8" x 1/4"</u>		
different sizes & shapes-loose formation				11. Static water level: _____ mo./day/yr. <u>5.9</u> ft. below land surface Date <u>11/30/76</u>		
Soft blue shale				12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield _____ g.p.m.		
(Use a second sheet if needed)				13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____		
				14. Well head completion: <u>18</u> inches above grade <input type="checkbox"/> Pitless adapter		
				15. Well grouted? <u>yes</u> With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.		
				16. Nearest source of possible contamination: <u>Sewage</u> ft. <u>460</u> Direction <u>East</u> Type <u>Lagoon</u> Well disinfected upon completion? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
				17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ Model number _____ HP _____ Volts _____ Length of drop pipe _____ ft. capacity _____ g.p.m. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other		
18. Elevation:		19. Remarks: Purpose of this well is to be able to monitor any changes in ground water quality from possible seepage from adjacent sewage lagoons.		20. Water well contractor's certification: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. Layne Western Co. 102 Business name <u>Wichita</u> <u>Kansas</u> License No. _____ Address _____ Signed <u>[Signature]</u> Date <u>11/7/76</u> Authorized representative		

Forward the white, blue and pink copies to the Department of Health and Environment

Form WWC-5