WATER WELL RECORD KSA 82a-1201-1215

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

| | County | Fraction SE 1/4 SW 1/4 SW 1/4 | | Section number | | Township number | Range number | |
|--|---------------|-------------------------------|--|----------------|--------------------------------------|--|---|------|
| 1. Location of well: | Lyon | | | | | T 19 s | R 11 E/30 | |
| 2. Distance and direction from nearest town or city: SW Edge of Emporia, Kansas R.R. o Street address of well location if in city: | | | er of well: Iowa Beef Processors, Inc. | | | | | |
| 4. Locate with "X" in section below: Sketch map: | | | | | | 6. Bore hole dia. 11 in. Completion date | | |
| Well No. 4 Well No. 4 Well No. 4 Well No. 4 | | | | | | 7 Cable tooi _X Rotary Hollow rod Jetted 8. Use: Domestic Po Irrigation A Lawn O 9. Casing: Material Threaded Welded | Driven Dug Bored Reverse rotary Jublic supply Industry ir conditioning Stock if field water WOther Height: Above or NACK Surface 18 Weight Ibs./ft. | 0 |
| 5. Type and color of | · material | | | From | То | 10. Screen: Manufacturer's | | ľ |
| Top soil | | | | 0 | 2 | Type PVC Slot/gauze 1/8" | Dia. 4" | |
| Clay | | | | 2 | 20 | $\begin{array}{c ccccccccccccccccccccccccccccccccccc$ | | |
| Large grave, rocks, flat & round stones | | | | 20 | 27 | Gravel pack? Size ra | mo./day/yr. | |
| different shapes & sizes-loose formation | | | | | | 10 ft. below land sur | face Date $11/30/7$ | 6 |
| Soft blu | ge shale | | | 27 | 40 | ft. after ft. after ft. after Estimated maximum yield — 13. Water sample submitted: Yes X No | hrs. pumping g.p.m. hrs. pumping g.p.m. g.p.m. | |
| DODONIAN ANY ANA AMIN'NO CONTRANTANA AMIN'NY C | | | 0 (1000) | | | 14. Well head completion: Pitless adapter | 18 Inches above grade | |
| | | | | | | 15. Well grouted? <u>YES</u> With:Neat cement Depth: From ft. to | Bentonite X Concrete 10 ft. | |
| *** | | | | | rogalosa pra primili Planta Ballyado | 16. Negrest source of possible ft. 350 Direction | e contamination: \underbrace{Sewage}_{NE} | |
| | | | ************************************** | | | 17. Pump: Manufacturer's name Model number | X Not installed | |
| Name of the latest and the latest an | | | intro a com n os respectos com | | | | ft. capacityg.p.m. | . ≤ |
| | (Use a second | sheet if needed) | | | | Jet Centrifugal | Reciprocating Other | Se |
| 18. Elevation: 19. Remarks: Purpose of this well is to be able to any changes in possible seepage from adjacent sewage agoons. Slope Upland X Valley | | | | | | 20. Water well contractor's | certification: ny jurisdiction and this report wledge and belief. | |
| | | | | | | Business name Address 1011 M Signed Authorized re | Harry St., V | igh: |