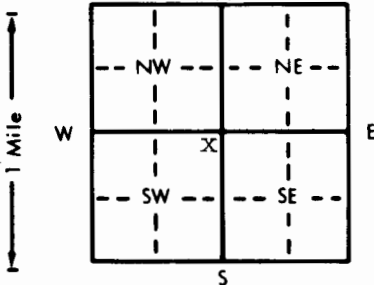


1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Rice	NE 1/4 NE 1/4 SW 1/4	29	T 20 S	R 7 W E/W

Distance and direction from nearest town or city street address of well if located within city?  
 1/2 mile East of Samon & 1/2 mile North

2 WATER WELL OWNER: American Salt Company  
 RR#, St. Address, Box # : Box 493  
 City, State, ZIP Code : Lyons, Kansas 67554  
 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: 65 ft. ELEVATION:  
 Depth(s) Groundwater Encountered 1. . . . . ft. 2. . . . . ft. 3. . . . . ft.  
 WELL'S STATIC WATER LEVEL . . . . . 10 . . . ft. below land surface measured on mo/day/yr May 18, 1985 . . .  
 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 . . . . . 8 . . . 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  0 Observation well  
 Was a chemical/bacteriological sample submitted to Department? Yes . . . . . No  . . . . .; If yes, mo/day/yr sample was submitted  
 Water Well Disinfected? Yes  No

5 TYPE OF BLANK CASING USED:  
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued  . . . . . Clamped . . . . .  
 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded . . . . .  
 7 Fiberglass Threaded . . . . .  
 Blank casing diameter . . . . . 4 . . . in. to . . . . . 65 . . . ft., Dia . . . . . in. to . . . . . ft., Dia . . . . . in. to . . . . . ft.  
 Casing height above land surface . . . . . 18 . . . in., weight . . . . . lbs./ft. Wall thickness or gauge No. . . . .  
 TYPE OF SCREEN OR PERFORATION MATERIAL:  
 1 Steel 3 Stainless steel 5 Fiberglass  PVC 10 Asbestos-cement  
 2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify) . . . . .  
 12 None used (open hole)  
 SCREEN OR PERFORATION OPENINGS ARE:  
 1 Continuous slot 3 Mill slot 5 Gauzed wrapped  Saw cut 11 None (open hole)  
 2 Louvered shutter 4 Key punched 7 Torch cut 9 Drilled holes  
 10 Other (specify) . . . . .  
 SCREEN-PERFORATED INTERVALS: From . . . . . 55 . . . ft. to . . . . . 65 . . . ft., From . . . . . ft. to . . . . . ft.  
 From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.  
 GRAVEL PACK INTERVALS: From . . . . . 10 . . . ft. to . . . . . 65 . . . ft., From . . . . . ft. to . . . . . ft.  
 From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.

6 GROUT MATERIAL: 1 Neat cement  Cement grout 3 Bentonite 4 Other . . . . .  
 Grout intervals: From . . . . . 0 . . . ft. to . . . . . 10 ft., From . . . . . 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 14 Abandoned water well  
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well  
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)  
 13 Insecticide storage . . . . . None . . . . .  
 Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	3	Top Soil			
3	12	Clay			
12	65	Medium 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) May 18, 1985 . . . . . and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 134 . . . . . This Water Well Record was completed on (mo/day/yr) May 24, 1985 . . . . . under the business name of Rosencrantz & Bemis Enterprise by (signature) Mike Flowers by Chris Shy  
 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, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.