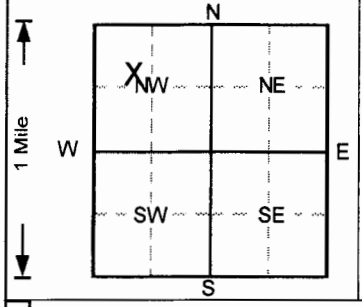
WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: **Rice**	**SE ¼ NW ¼ NW ¼**	**9**	T **20** S	R **8** E/W

Distance and direction from nearest town or city street address of well if located within city?
3/4 mile W of Grand & American, S into field

2 WATER WELL OWNER: **Lyons Salt Co.**
RR#, St. Address, Box # : **1660 Avenue N**
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 **248** ft. ELEVATION: **1659.5**
Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.
WELL'S STATIC WATER LEVEL **227.2** ft. below land surface measured on mo/day/yr **10/2/2009**
Pump test data: Well water was **NA** ft. after hours pumping gpm
Est. Yield **NA** gpm: Well water was ft. after hours pumping gpm
Bore Hole Diameter **14** in. to **94** ft., and **10** in. to **230** 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 ✓

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 ✓
Blank casing diameter **10** in. to **93** ft., Dia **6** in. to **230** ft., Dia in. to ft.
Casing height above land surface **37.2** in., weight lbs./ft. Wall thickness or gauge No. **Sch. 40**

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

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

SCREEN-PERFORATED INTERVALS: From **230** ft. to **248** ft., From ft. to ft.
From ft. to ft., From ft. to ft.
GRAVEL PACK INTERVALS: From ft. to 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 **230** 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 **N/A**
Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Topsoil,	244	248	Shale, tr. of gray vf sandstone, Red Brown w/
3	16	Clay, Brown			
16	28	Clay, Lt. Brown			
28	72	Sand, m-c,			
72	85	Clay, silty, w/sand stringers, Lt. Tan			
85	94	Clay, firm, Tan			
94	210	Shale, Red			
210	215	Shale, w/tr. of green to gray green, Red Brown			6" bore hole 230-248'
215	229.5	Shale, w/incr. green to gray green, Red Brown			
229.5	230	Shale, as above, w/tr. stone corral in cuttings,			
230	233.5	Shale, Red Brown w/gray			
233.5	235	Anhydrite, V. Lt. Gray to White			
235	240	Dolomite w/Anhydrite, Lt. to Med. Gray			LSM-11-G
240	241.5	Dolomite w/Anhydrite, Med. Gray to Brown			
241.5	244	Shale, Blue Gray to Green			

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) **6/10/2009** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **527** This Water Well Record was completed on (mo/day/yr) 10/7/09 under the business name of **GeoCore, Inc.** by (signature) Dale Hall

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.

OFFICE USE ONLY T R E/W SEC. ¼ ¼ ¼