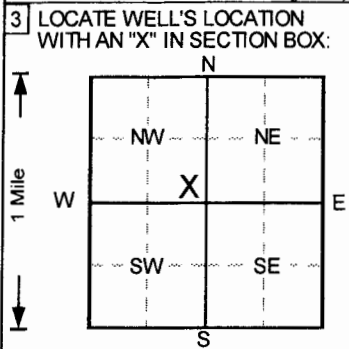


WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL: County: Rice	Fraction SE ¼ SE ¼ NW ¼	Section Number 10	Township Number T 20 S	Range Number R 8 E W
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Distance and direction from nearest town or city street address of well if located within city?
1/2 mi E & 3/8 mi S of Ave. N & Hwy 14, Lyons

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:



4 DEPTH OF COMPLETED WELL **90** ft ELEVATION:

Depth(s) Groundwater Encountered 1. **27** ft 2. ft 3. ft

WELL'S STATIC WATER LEVEL ft below land surface measured on mo/day/yr

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 **8** in. to **90** ft, and **2.75** in. to **250.5** 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)**
Cored test hole
 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:

1 Steel	3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped _____
2 PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded _____
		7 Fiberglass		Threaded _____

Blank casing diameter **4** in. to **90** ft, Dia in. to ft, Dia in. to ft

Casing height above land surface in., weight lbs./ft. Wall thickness or gauge No. **Sch. 40**

TYPE OF SCREEN OR PERFORATION MATERIAL

1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)	10 Asbestos-cement
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS	12 None used (open hole)
				11 Other (specify) _____

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 ft to ft, From ft to ft

GRAVEL PACK INTERVALS: 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 **90** 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	Salt plant

Direction from well? **E** How many feet? **250**

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	30	Clay,			
30	38	Sand,			
38	47	Clay,			
47	75	Sand,			
75	77	Sand and gravel,			
77	82	Clay,			
82	150	Shale, Red			
150	204	Shale, Red and Gray			
204	211	Shale, Red and Blue			
211	212	Dolomite,			
212	216	Shale, Red and Blue			
216	228.5	Dolomite,			
228.5	250.5	Shale, with gypsum, Red and Green			
					Test well
					Project Name: Lyons Salt Co. Shaft
					GeoCore # 1171, #

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) **7/28/2004** 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) **5/26/2010** under the business name of **GeoCore, Inc.** by (signature) *Dave A. Kell*

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.

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