

<b>1 LOCATION OF WATER WELL:</b> County: <u>Rice</u>		Fraction <u>NE 1/4</u> <u>NE 1/4</u> <u>NW 1/4</u>		Section Number <u>13</u>	Township Number <u>T 20</u> <u>S</u>	Range Number <u>R 8 W</u> <u>E/W</u>																																																																																										
Distance and direction from nearest town or city street address of well if located within city? <u>56 HW &amp; 14 HW, 2 S, 2 1/2 E, South Side</u>																																																																																																
<b>2 WATER WELL OWNER:</b> <u>American Salt</u> RR#, St. Address, Box # : City, State, ZIP Code : <u>Lyons, Kansas 67554</u> Board of Agriculture, Division of Water Resources Application Number:																																																																																																
<b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b> <div style="text-align: center;"><p>1 Mile</p></div>		<b>4 DEPTH OF COMPLETED WELL:</b> <u>65</u> ft. ELEVATION: ..... Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft. WELL'S STATIC WATER LEVEL ..... <u>31</u> ft. below land surface measured on mo/day/yr <u>Nov. 15, 1984</u> Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm Est. Yield <u>800</u> gpm: Well water was ..... ft. after ..... hours pumping ..... gpm Bore Hole Diameter: ..... <u>8</u> 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 <input checked="" type="checkbox"/> Observation well Was a chemical/bacteriological sample submitted to Department? Yes.....No... <input checked="" type="checkbox"/> ; If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes <input checked="" type="checkbox"/> No																																																																																														
<b>5 TYPE OF BLANK CASING USED:</b> 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped ..... <input checked="" type="checkbox"/> PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded ..... Blank casing diameter <u>4</u> in. to <u>45</u> ft., Dia. .... in. to ..... ft., Dia. .... in. to ..... ft. Casing height above land surface: ..... <u>24</u> in., weight ..... lbs./ft. Wall thickness or gauge No. .... TYPE OF SCREEN OR PERFORATION MATERIAL: <input checked="" type="checkbox"/> PVC 10 Asbestos-cement 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) ..... 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped <input checked="" type="checkbox"/> Saw cut 11 None (open hole) 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) ..... SCREEN-PERFORATED INTERVALS: From ..... <u>45</u> ft. to ..... <u>65</u> ft., From ..... ft. to ..... ft. GRAVEL PACK INTERVALS: From ..... <u>10</u> ft. to ..... <u>65</u> ft., From ..... ft. to ..... ft. From ..... ft. to ..... ft., From ..... ft. to ..... ft.																																																																																																
<b>6 GROUT MATERIAL:</b> <input checked="" type="checkbox"/> Neat cement 2 Cement grout 3 Bentonite 4 Other ..... Grout Intervals: From ..... <u>0</u> ft. to ..... <u>10</u> 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 ..... <u>NONE</u> Direction from well? How many feet? <table border="1" style="width:100%; border-collapse: collapse;"><thead><tr><th>FROM</th><th>TO</th><th>LITHOLOGIC LOG</th><th>FROM</th><th>TO</th><th>LITHOLOGIC LOG</th></tr></thead><tbody><tr><td>0</td><td>18"</td><td>Top Soil, took core sample, 15min</td><td>55</td><td>602'</td><td>Green clay &amp; limestone</td></tr><tr><td>18"</td><td>10'</td><td>Brown clay</td><td>60</td><td>659'</td><td>Green clay &amp; shale</td></tr><tr><td>10'</td><td>-</td><td>Took core sample</td><td></td><td></td><td></td></tr><tr><td>10</td><td>15</td><td>Brown clay</td><td></td><td></td><td></td></tr><tr><td>15</td><td>20</td><td>Brown clay, tight, took core sample</td><td></td><td></td><td></td></tr><tr><td></td><td></td><td>Shut down for dinner 12:00 to 1:30</td><td></td><td></td><td></td></tr><tr><td>20</td><td>302'</td><td>Brown Clay</td><td></td><td></td><td></td></tr><tr><td>30</td><td>-</td><td>Took test</td><td></td><td></td><td></td></tr><tr><td>30</td><td>40</td><td>Medium Red Sand w/some clay, drill fairly tight</td><td></td><td></td><td></td></tr><tr><td>40</td><td>-</td><td>Took Test</td><td></td><td></td><td></td></tr><tr><td>40</td><td>50</td><td>Medium Sand, fairly loose</td><td></td><td></td><td></td></tr><tr><td>50</td><td>-</td><td>Test</td><td></td><td></td><td></td></tr><tr><td>50</td><td>552'</td><td>Medium Sand, tight</td><td></td><td></td><td></td></tr><tr><td>55</td><td>-</td><td>Test</td><td></td><td></td><td></td></tr></tbody></table>							FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG	0	18"	Top Soil, took core sample, 15min	55	602'	Green clay & limestone	18"	10'	Brown clay	60	659'	Green clay & shale	10'	-	Took core sample				10	15	Brown clay				15	20	Brown clay, tight, took core sample						Shut down for dinner 12:00 to 1:30				20	302'	Brown Clay				30	-	Took test				30	40	Medium Red Sand w/some clay, drill fairly tight				40	-	Took Test				40	50	Medium Sand, fairly loose				50	-	Test				50	552'	Medium Sand, tight				55	-	Test			
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<b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was <input checked="" type="checkbox"/> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>November 15, 1984</u> ..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>134</u> ..... This Water Well Record was completed on (mo/day/yr) <u>November 15, 1984</u> under the business name of <u>Rosencrantz &amp; Bemis Enterprise</u> by (signature) <u>Mike Hawes</u> INSTRUCTIONS: Use typewriter or ball point pen, <b>PLEASE PRESS FIRMLY</b> and <b>PRINT</b> 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.																																																																																																