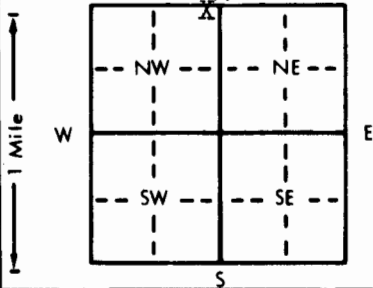


1 LOCATION OF WATER WELL: County: Rice	Fraction NE 1/4 NE 1/4 NW 1/4	Section Number 14	Township Number T 20 S	Range Number R 8 W E/W
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Distance and direction from nearest town or city street address of well if located within city?  
56 HW & 14 HW, 2 S, 1 1/2 E

2 WATER WELL OWNER: American Salt  
RR#, St. Address, Box # :  
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: 73. ft. ELEVATION:

Depth(s) Groundwater Encountered 1. . . . . ft. 2. . . . . ft. 3. . . . . ft. . . . . ft.  
WELL'S STATIC WATER LEVEL . . . . . 15 . . . ft. below land surface measured on mo/day/yr November 26, 1984  
Pump test data: Well water was . . . . . ft. after . . . . . hours pumping . . . . . gpm  
Est. Yield 1000 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  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: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued  Clamped . . . . .  
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded . . . . .  
 PVC 4 ABS 7 Fiberglass . . . . . Threaded . . . . .

Blank casing diameter 4 in. to 6.3 ft., Dia . . . . . in. to . . . . . ft., Dia . . . . . in. to . . . . . ft.  
Casing height above land surface . . . . . 24 . . . in., weight . . . . . lbs./ft. Wall thickness or gauge No. . . . .

TYPE OF SCREEN OR PERFORATION MATERIAL:  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  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 . . . . . 63 . . . ft. to . . . . . 73 . . . ft., From . . . . . ft. to . . . . . ft.  
From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.  
GRAVEL PACK INTERVALS: From . . . . . 10 . . . ft. to . . . . . 73 . . . ft., From . . . . . ft. to . . . . . ft.  
From . . . . . ft. to . . . . . ft., From . . . . . ft. to . . . . . ft.

6 GROUT MATERIAL:  Neat cement 2 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	20	Brown Clay			
20	25	Medium sand w/clay, tight formation			
25	30	Medium sand, tight formation			
30	40	Medium sand			
40	60	Medium sand w/fine & clay, drill tight			
60	66	Fine sand			
66	73	Medium Sand, loose			
73	-19	Shale			

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) November 26, 1984 . . . . . 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) November 26, 1984 . . . . .  
under the business name of Rosencrantz & Bemis Enterprise by (signature) Mike Platts

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.