ICW-35A

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

1 LOCATION OF WATER WELL: County: Sedgwick | Fraction: SW ¼ SW ¼ SW ¼ | Section Number: 27 | Township Number: T 28 S | Range Number: R 1 E (W)

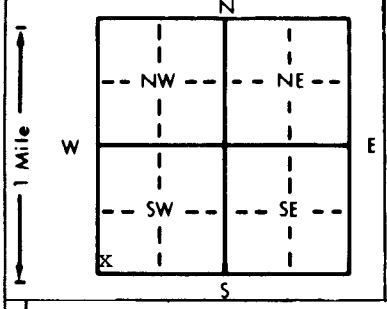
Distance and direction from nearest town or city street address of well if located within city?

Approximately 4 miles west of Haysville, KS

2 WATER WELL OWNER: Vulcan Materials Company
RR#, St. Address, Box # : Chemicals Division
City, State, ZIP Code : P.O. Box 12283 Wichita, KS 67277

Board of Agriculture, Division of Water Resources
Application Number: Not available

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL 74 ft. ELEVATION: unknown

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

WELL'S STATIC WATER LEVEL 51.6 ft. below land surface measured on mo/day/yr .....

Pump test data: Well water was not ch'd ft. after ..... hours pumping ..... gpm

Est. Yield unknown gpm: Well water was ..... ft. after ..... hours pumping ..... gpm

Bore Hole Diameter 24 in. to 74 ft., and ..... in. to ..... ft.

WELL WATER TO BE USED AS: 1 Domestic 3 Feedlot 5 Public water supply 6 Oil field water supply 7 Lawn and garden only 8 Air conditioning 9 Dewatering 10 Monitoring well 11 Injection well 12 Other (Specify below) Containment/interceptor
2 Irrigation 4 Industrial xxxxxxxx

Was a chemical/bacteriological sample submitted to Department? Yes ..... No x ; If yes, mo/day/yr sample was submitted ..... Water Well Disinfected? Yes ..... No x

5 TYPE OF BLANK CASING USED: 1 Steel 2 PVC 3 RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below)

CASING JOINTS: Glued ..... Clamped ..... Welded x Threaded .....

Blank casing diameter 16 in. to 52.5 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.

Casing height above land surface 24 in., weight 36.87 lbs./ft. Wall thickness or gauge No. .219

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

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

SCREEN-PERFORATED INTERVALS: From 52.5 ft. to 72.5 ft., From ..... ft. to ..... ft.
From ..... ft. to ..... ft., From ..... ft. to ..... ft.

GRAVEL PACK INTERVALS: From 47 ft. to 74 ft., From ..... ft. to ..... ft.
From ..... ft. to ..... ft., From ..... ft. to ..... ft.

6 GROUT MATERIAL: 1 ~~Neat cement~~ xxxxxxxxx 2 Cement grout 3 Bentonite 4 Other Hole Plug

Grout Intervals: From 0 ft. to 44 ft., From ..... ft. to ..... ft., From 44 ft. to 47 ft.

What is the nearest source of possible contamination:
1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below) Chemical Plant

Direction from well? Located within plant How many feet? Located within plant

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	15.5	Topsoil and clay, brown			
15.5	21	Sand and Gravel, fine with clay			
21	28	Sand and Gravel, very fine to fine			
28	36	Sand and Gravel, fine with lots of clay			
36	41	Clay with sand			
41	49	Clay, black and hard			
49	52	Clay with gravel, fine			
52	57	Sand and Gravel, very fine to fine			
57	70	Sand and Gravel, fine to medium some coarse			
70	74	Clay, brown and tan			

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) 2-21-90 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 185 This Water Well Record was completed on (mo/day/yr) 3-2-90 under the business name of Clarke Well & Equipment, Inc. by (signature)

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 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

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