	WATER W	ELL ]		Form V	VWC-5 e in Well Use			sion of Wate			Well ID		
	1 LOCATIO				Fraction.	vinent i i i i		irces App. N		Farraghia Nam		nge Number	
	County:			نابا:	1/4/W/4	51110	AMA Sect	ion Numbe	er   1	Гownship Num Т <b>ЭО</b> S	oer Rai	ige Number ✓□EXW	
	2 WELLON	LJA.	rber		- 141 NY	-Jug	A Parameter Design	- A A	1				
	2 WELL UV	VINEAK;	Last Name:	imbert	First: KOK	treet or Rural Address where well is located (if unknown, distance and rection from nearest town or intersection): If at owner's address, check here:							
ě,	Address: Lake CIty State KS ZIP: 67071 4 N. Lake City									R CHU	KS		
	City: Le	rke 1	2/+V	State: (5	ZIP: 670	, i ware of the							
	3 LOCATE V	VELL				52							
	WITH "X"		4 DEPTI	DEPTH OF COMPLETED V epth(s) Groundwater Encountered:			, tt.	5 Latitude:(decimal degree					
	SECTION		Depth(s) G	roundwater E	incountered: 1)	ر. بجسر ، ا	<del>/</del> It.			a degrada karanga arang			
	N				) ft.,					VGS 84 🔲 NA		NAD 27	
	r in the second	WELL'S STATIC WATER LEVEL: 2.2.								atitude/Longitud			
		below land surface, measured on (mo-day-y above land surface, measured on (mo-day-y						A STATE OF THE PARTY OF THE PAR					
	₩ NW							[					
		Tomp tool salar. Well water was a salar to						☐ Land Survey ☐ Topographic Map					
	W	W E after hours pumping Well water was ft						m Online Mapper:					
	SW	SWSE after hours pumping								The state of the s			
		1	Latimated V	Viold //	0.000			6 Eleva	6 Elevation:ft. Ground Level				
	Estimated Yield:gpm  Bore Hole Diameter:in, to5						ft and Source:   Land Survey						
1.7	1 mile		Bore from	Diameter,	in. to	. 2007 - 187 - 23 -	fr. and			other			
	7 WELL WA		O RE USED					<del>1</del>					
	1. Domestic:	er Supply: well		10 🗀 0	il Field	Water Sunniv	lease						
	☐ Household	ŀ			g: how many w					Field Water Supply: leasele: well ID			
	☐ Lawn & C									☐ Uncased ☐			
	☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID  XLivestock 8. ☐ Monitoring: well ID									: how many bore			
	2. Trrigation									.oop 🔲 Horizoi			
	3. ☐ Feedlot									oop Surface D			
	4.  Industrial			Recovery	☐ Injec					pecify):			
	Was a chemical/bacteriological sample submitted to KDHE?  Yes No If yes, date sample was submitted:												
	Was a chemical bacteriological sample submitted to KDHE?  Yes \									.οα	######################################		
	8 TYPE OF CASING USED: Steel X PVC Other CASING JOINTS: Glued Clamped									ad III Walde	d [] Throadad		
Casing diameter								nucu □ Ciampo in to	or Division	u 📋 imcaded			
	Casing height a	bove land	l surface $\mathcal{Z}$	4 in	Weight	160	lbs/ft	Wall thicl	kness o	or gauge No.	le construction de		
0	TYPE OF SCREEN OR PERFORATION MATERIAL:  □ Steel □ Stainless Steel □ Fiberglass □ Other (Specify)												
·									Augusta da ara				
									Na proposition	. a z g a la la Manada de de			
	□ Louvered Shutter □ Key Punched □ Wire Wrapped Saw Cut □ None (Open Hole)  SCREEN-PERFORATED INTERVALS: From								) ft.				
	GRAVEL PACK INTERVALS: From 20 ft. to 40 ft., From 45. ft. to . 5.2 ft., From ft. to									) ft.			
	9 GROUT MATERIAL: Neat cement Cement grout Rentonite Other										*****		
	Grout Intervals:	From .	<i>Q</i> ft. to	o 2.0	. ft., From	<i>H.C</i> h	. to4.5	ft., From	(,,,,,,,,,	ft. to	ft.		
	Nearest source												
4,11	Septic Tan			Lateral Lines				ivestock Pe			icide Storag		
471.6	Sewer Lin			Cess Pool		age Lago		uel Storage			doned Water		
	☐ Watertight	10 N		Seepage Pit	☐ Feed		<del></del>	ertilizer Sto		N 11 4 NO	'ell/Gas Wel		
	Direction from	well?	<u> </u>	de spire sant spire i en a refer as étad a	Dietonea	from wel	 19	500			ã.		
	10 FROM		LITHOLOG		FROM	TO				IG INTERVALS			
	(2)	TO 2	521	FITHOLOG	IC LOG		TROM	10	1,11,11	o. Log (com.)	n i boodii	IO INTERVALS	
	- 4	-7	The said	ic Sar		i	-			<u> </u>	<del></del>	<u> </u>	
		2	avan	Clay	<u> </u>						· · · · · · · · · · · · · · · · · · ·	<del></del>	
Ì	12	10	gray	Sary		······································	-		<del></del>	<del></del>		<del></del>	
	96	<del>13</del>	5	sary h	+ Clas					and an arrangement of the state			
	23	₹¥	Sand	0000	1 Cing					<u> </u>		· · · · · · · · · · · · · · · · · · ·	
	-43'V	50		1.171/4			Notes:			<del>- Sayadan - Sayadan</del>	<del></del>	<del></del>	
	373 12	38 30 Yellow Clay						110000					
	- KY 12												
	11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed under my jurisdiction and was completed on (mo-day-year)								onetructed	or nlugged			
									ny knowlec	or progged leg and helief			
	Kansas Water	Well Co	ontractor's / ic	ense No.	TTU T	his Wat	er Well Reco	ord Was con	mplate	ed on (mo-day-	vear)	23-13	
	under the busi	ness nan	ne of <b>L.V</b>	man	5. LILL		andras in the second	/	1 La	in algor	Abra	AND	
l													
		INSTRUCTIONS: Send one copy to WATER WELL OWNER and retain one copy for your records. Submit fee of \$5.00 for each constructed well along with one (white) copy to Ka Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone (785) 296-3565.											
Į	Visit us at ht	Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 9/10/2012									sed 9/10/2012		