W	TER WE	LL RECORD	Form V	WC-5	Div	ision of Wate	r Resources App. N	lo. 201205	5//	
		OF WATER WELL:	Fraction		Sectio	n Number	Township No.	Range N		
	County: Bar		1/4 NW 1/4 SV			30	T 31 S	R 11	□E <b>☑</b> W	
		Address of Well Location;	Global Positioning System (GPS) information:							
	from nearest town or intersection: If at owner's address, check here					Latitude: (in decimal degrees) Longitude: (in decimal degrees)				
	1 1/2 North, 1 East of Medicine Lodge					Elevation: (In decimal degrees)				
	WATED WELLOWNED:					- <u>Datum</u> : ☐ WGS 84, ☐ NAD 83, ☐ NAD 27				
2	WATER WELL OWNER: Lario Oil & Gas RR#, Street Address, Box #: 301 South Market				Collection Method:					
	RR#, Street Address, Box #: 301 South Market City, State, ZIP Code : Wichita, Ks 67202				☐ GPS unit (Make/Model:) ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey					
	ony, oute, z	. vvicnita.	Ks 6/202		Est. A	ccuracy: $\square$	<3 m,	] 5-15 m,	] >15 m	
W S CA	ASING JOINT Casing diame Casing height	## A DEPTH OF ODE Depth(s) Ground WELL'S STATE Pump EST. YIELD. N. Bore Hole Diam WELL WATER Domestic Irrigation Was a chemical If yes, motors.	☐ Industrial ☐ bacteriological samp day/yr sample was su fected? ☑ Yes ☐ PVC ☐ mped ☐ Welded ft., Diameter in., Weigl	(1)	ft. below left. below left. ft., and ser supply wn & gar below Departs.	(2)  and surface (2)  after  afterin.  y	measured on mo/o	day/yr. 8-10 nping nping .ft. Injection w Other (Spec	D-12gpmgpm ell cify below)	
☐ Steel ☐ Stainless Steel ☑ PVC ☐ Other (Specify)										
	☐ Louvere CREEN-PERI GRAV	d shutter	Wire wrapped From. 70 From. 70 From. 70 From. 70	Saw cut ft. to50 ft. to ft. to20 ft. to	Oth	er (specify) ft., From ft., From ft., From ft., From		to to to	ft. ft. ft.	
Gr	out Intervals: nat is the near Septic ta Sewer li		o ft., Fro amination: les  Pit privy Sewage lagoon	m .20	ft. to	Other ft.,  Insecticide Abandonee Oil well/ge	Fromestorage 🗹 Ot	ft. to her (specify	ft. below)	
	Direction fro	Namharraak	nt reedyard				as well			
	OM TO	LITHOLOG		FROM	TO		OG (cont.) <u>or</u> PLI			
0	4	Top soil				***************************************				
4	21	Red clay								
21	64	Sand & gravel								
64	70	Red shale								
									ve w	
									<del></del>	
						NV-N				
7 (	CONTRACT	OR'S OR LANDOWNER	S CERTIFICATION	ON: This water	er well w	vas 🗸 consti	ructed, 🗌 reconst	ructed, or [	plugged	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was   constructed, □ reconstructed, or □ plugged under my jurisdiction and was completed on (mo/day/year) .8-10-12										
Ka	nsas Water W	/ell Contractor's License N	o. 134 This	Water Well R	ecord w	as completed	d on (mo/day/year	·) _8-28-12.		
un	der the busine	ess name ofRosencrant. Use typewriter or ball point pen	PIFACE DDECC EIDA	I V and DDINT of	by (s	ignature) 🚨	s and chack the com	9-Co-	and these:	
(wh	iite, blue, pink) ( ephone 785-296	to Kansas Depar tment of Health -5524. Send one copy to WAT	and Environment, Bureau	u of Water, Geol	ogy Sectio	on, 1000 SW Ja	ackson St., Suite 420.	Topeka, Kan	sas 666 12-1367.	
	3.7/www.kdneks.	gov/waterwell/index.html.			Ch	neck: X W	hite Copy, 🔲 B	lue Copy, [	Pink Copy	