WATER WELL R	ECORD Form W	WC-5	Γ	oivision of W	ater					
Original Record	Correction	n Well Use	Re	esources App	. No.	Well ID				
1 LOCATION OF W		raction		ection Num	ber Township	Number Ra	nge Number			
County: Da	rber	4 NW N#	3 5K	12	T 3		5 □ E I W			
2 WELL OWNER: L	ast Name: F	ipst:	Street or R	ural Addre	ss where well is loo	cated (if unknown	distance and			
Business:	2 - L-Bar	LLC,	direction from	n nearest town	or intersection): If at	owner's address.	check here:			
Address: Valley 1 - June 1 - Valley 1 - June 1 - Valley					U, 183. of Medicine Lodge					
1 2 1/ /	A. WE	CIP: (27071	10	$\omega$ ,	185,04	Medicin	u bodg			
3 LOCATE WELL							0			
WITH "Y" IN 4 DEPTH OF COMPLETED WELL;, F.Q ft.					itude:		(decimal degrees			
SECTION BOX:	Double(a) Character Engage 4. 1)				Longitude:(decimal degrees)					
1	N 2) ft., or 4) Dry Well				Horizontal Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27					
	WELL'S STATIC WATER LEVEL:				Source for Latitude/Longitude:  GPS (unit make/model:					
NW NE					(WAAS enabled? ☐ Yes ☐ No)					
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map					
W E	after hours pumping				Online Mapper:					
SW SE	Well water was			-						
				6 Elev	6 Elevation:ft. Ground Level TOO					
S	Bore Hole Diameter:			Sour	Source: Land Survey GPS Topographic Map					
mile  in. to ft.					Other					
7 WELL WATER TO			.,,							
1. Domestic:	5. Public Water S	Supply: well ID		10. □ 0	Dil Field Water Sunn	lv· lease				
☐ Household	6. Dewatering: how many wells?			11. Test	10.  Oil Field Water Supply: lease					
☐ Lawn & Garden					☐ Cased ☐ Uncased ☐ Geotechnical					
Livestock	8. Monitoring: well ID			12. Geo	12. Geothermal: how many bores?					
2. Trrigation	9. Environmental Remediation: well ID			a) (	a) Closed Loop 🔲 Horizontal 🔲 Vertical					
3. Feedlot	☐ Air Sparge ☐ Soil Vapor Extraction				b) Open Loop   Surface Discharge   Inj. of Water					
4.  Industrial	☐ Recovery	☐ Injection		13. 🔲 (	Other (specify):					
Was a chemical/bacteri	ological sample submitte	d to KDHE?	Yes X No	If yes, da	te sample was subr	nitted:				
Water well disinfected?	Vec DNo		•							
8 TYPE OF CASING U	SED: Steel NPVC	Other	CASI	NG JOINT	S: KGlued   Clar	mned   Welded	☐ Threaded			
Casing diameter5	in. to	meter	in. to	ft., Dia	meter in.	to ft	rineaded			
Casing height above land su	rfacein.	Weight 1.60	lbs./ft.	Wall thic	kness or gauge No					
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: A Glued Clamped Welded Threaded Casing diameter fin. to fin. to fin. to fin. to fin. to fin. to fin. Weight Screen Wall thickness or gauge No.										
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)										
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)										
SCREEN OR PERFORATION OPENINGS ARE:										
☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)										
Louvered Shutter    Kev Punched    Wire Wrapped    Saw Cut    None (Open Hole)										
SCREEN-PERFORATED INTERVALS: From										
GRAVEL PACK INTERVALS: From										
9 GROUT MATERIAL	: Neat cement	nent grout 🏻 🏻 Ber	ntonite 🔲 (	Other						
Grout Intervals: From	<b>O</b> ft. to <b>2.0</b> ft.,	From	ft. to	ft., From	ft. to	ft.				
Nearest source of possible			_		_					
☐ Septic Tank	Lateral Lines	☐ Pit Privy		Livestock Po		ecticide Storage				
☐ Sewer Lines ☐ Watertight Sewer Lines	Cess Pool	Sewage Lag		Fuel Storage		andoned Water W	/ell			
	Seepage Pit	☐ Feedyard	Ш	Fertilizer Ste	orage (A Oil	Well/Gas Well				
Direction from well?	$\sim$	Distance from we	 119	132	0	£.				
10 FROM TO	O LITHOLOGIC I		FROM	ТО	LITHO. LOG (cont.		INTEDUALS			
0 38	Ked Clan	200	11000	10	ZATIO, DOG (COIII.	., or I LOGOTING	INTERVALS			
38 66	Romeron 1 11									
62 96	Provide Signature	450 1								
75 77	The Jilly	15 gred								
	MYTY CO DO	rud								
77 78	Kea 'Shall									
			Notar							
			Notes:							
11 CONTRACTORICO	D I ANDOMAIEDIO CEI		Th'	11	of					
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was structed, reconstructed, or plugged										
Kansas Water Well Contractor's License No. This Water Well Record was download on (me dest of my knowledge and belief)										
under my jurisdiction and was completed on (mo-day-year)										
Mail I white copy along	with a fee of \$5.00 for each const	tructed well to: Kans	as Department	of Health and	Environment Bureau	Water GWTS Sag	tion			
Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.										
				Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/						