

10 BWP 7-12-84 + Hwy D.

1 LOCATION OF WATER WELL  
 County: **SMITH** Fraction **SW 1/4 SE 1/4 NW 1/4** Section Number **29** Township Number **T 3 S** Range Number **R 15 E**

Distance and direction from nearest town or city? **2 MI W. KENSINGTON** Street address of well if located within city?

2 WATER WELL OWNER: **CITY OF KENSINGTON**  
 RR#, St. Address, Box # :  
 City, State, ZIP Code **66951 KENSINGTON KAN.** Board of Agriculture, Division of Water Resources Application Number: **14005**

3 DEPTH OF COMPLETED WELL... **53** ft. Bore Hole Diameter... **34** in. to... **53** 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       10 Observation well

Well's static water level... **30** ft. below land surface measured on... **5** month... **10** day... **84** year

Pump Test Data : Well water was... ft. after... hours pumping... gpm  
 Est. Yield **30** gpm: Well water was... ft. after... hours pumping... gpm

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

Blank casing dia... **16** in. to... **40** ft., Dia... in. to... ft., Dia... in. to... ft.

Casing height above land surface... **30** in., weight... lbs./ft. Wall thickness or gauge No. **3/4"**

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

Screen or Perforation Openings Are:  
 1 Continuous slot       3 Mill slot       5 Gauzed wrapped       8 Saw cut       11 None (open hole)  
 2 Louvered shutter     4 Key punched       6 Wire wrapped       9 Drilled holes

Screen-Perforation Dia... **16** in. to... **53** ft., Dia... in. to... ft., Dia... in. to... ft.

Screen-Perforated Intervals: From... **40** ft. to... **53** ft., From... ft. to... ft.

Gravel Pack Intervals: From... **05** ft. to... **53** ft., From... ft. to... ft.

5 GROUT MATERIAL:  1 Neat cement     2 Cement grout     3 Bentonite     4 Other

Grouted Intervals: From... **4** ft. to... **30** ft., From... ft. to... ft., From... ft. to... ft.

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

Direction from well... **N** How many feet... **105** ? Water Well Disinfected?  Yes     No

Was a chemical/bacteriological sample submitted to Department?  Yes     No. **1471** If yes, date sample was submitted... month... day... year: Pump Installed?  Yes     No

If Yes: Pump Manufacturer's name **BERKLEY** Model No. HP **3** Volts **220**

Depth of Pump Intake... **49** ft. Pumps Capacity rated at... **35** gal./min.

Type of pump:  1 Submersible     2 Turbine     3 Jet     4 Centrifugal     5 Reciprocating     6 Other

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on... **7** month... **2** day... **1984** year

and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **108**

This Water Well Record was completed on... **7** month... **7** day... **1984** year under the business name of **D + D SERVICE** by (signature) **Wendell BeBe**

| LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: | FROM |   | TO                |   | LITHOLOGIC LOG |   |
|--|------|---|-------------------|---|----------------|---|
|  | 1    | 2 | 3                 | 4 | 5              | 6 |
|  | 1    | 2 | TOP SOIL          |   |                |   |
|  | 2    | 4 | 201 YELLOW CLAY   |   |                |   |
|  | 4    | 2 | 370 SAND + GRAVEL |   |                |   |
|  | 5    | 3 | 5519 BLUE SHALE   |   |                |   |
| ELEVATION:   |      |   |                   |   |                |   |

Depth(s) Groundwater Encountered 1. **30** ft. 2. ft. 3. ft. 4. ft. (Use a second sheet if needed)

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, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.