

Well # 2

WATER WELL REPORT



DEPARTMENT OF
ECOLOGY
State of Washington

Type of Work:

- Construction
- Decommission \Rightarrow Original installation NOI No. _____

Proposed Use: Domestic Industrial Municipal
 Dewatering Irrigation Test Well Other _____

Construction Type: New well Alteration Deepening Other _____
Method: Driven Jetted Cable Tool
 Dug Air- Mud-Rotary

Dimensions: Diameter of boring 6 in., to 420 ft.
 Depth of completed well 420 ft.

Construction Details:		Wall							
Casing	Liner	Diameter	From	To	Thickness	Steel	PVC	Welded	Thread
<input checked="" type="checkbox"/>	<input type="checkbox"/>	6 in.	+1.5	80	_____ in.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	4 in.	-10	420	_____ in.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	_____ in.	_____	_____	_____ in.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	_____ in.	_____	_____	_____ in.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Perforations: Yes No Type of perforator used SAW CUT
 No. of perforations 184 Size of perforations 3/8 in. by 4 in.
 Perforated from 370 ft. to 410 ft. below ground surface

Screens: Yes No K-Packer \Rightarrow Depth _____ ft.
 Manufacturer's Name _____
 Type _____ Model No. _____
 Diameter _____ in. Slot size _____ in. from _____ ft. to _____ ft.
 Diameter _____ in. Slot size _____ in. from _____ ft. to _____ ft.

Sand/Filter pack: Yes No Size of pack material _____ in.
 Materials placed from _____ ft. to _____ ft.

Surface Seal: Yes No To what depth? 18 ft.
 Material used in seal BENTONITE
 Did any strata contain unusable water? Yes No
 Type of water? _____ Depth of strata _____
 Method of sealing strata off _____

Pump: Manufacturer's Name _____ Type: _____
 H.P. _____ Pump intake depth: _____ ft. Designed flow rate: _____ gpm

Water Levels: Land-surface elevation above mean sea level 1847 ft.
 Stick-up of top of well casing _____ ft. above ground surface
 Static water level 127 ft. below top of well casing Date 09/10/2020
 Artesian pressure _____ lbs. per square inch Date _____
 Artesian water is controlled by _____ (cap, valve, etc.)

Well Tests:
 Was a pumping test performed? No Yes \Rightarrow by whom? _____
 Yield _____ gpm with _____ ft. drawdown after _____ hrs.
 Yield _____ gpm with _____ ft. drawdown after _____ hrs.
 Yield _____ gpm with _____ ft. drawdown after _____ hrs.
 Recovery data (time = zero when pump is turned off - water level measured from well top to water level)

Time	Water Level	Time	Water Level	Time	Water Level
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

 Date of pumping test _____
 Bailer test _____ gpm with _____ ft. drawdown after _____ hrs.
 Air test 3-5 gpm with stem set at 410 ft. for 1 hrs. Date 09/09/2020
 Artesian flow _____ gpm
 Temperature of water _____ °F Was a chemical analysis made? Yes No

Notice of Intent No. WE40457
 Unique Ecology Well ID Tag No. BMH531
 Site Well Name (if more than one well): _____
 Water Right Permit/Certificate No. _____
 Property Owner Name WILLIAM HOING
 Well Street Address 720 DEER MEADOW WAY
 City KETTLE FALLS County STEVENS
 Tax Parcel No. 1047411
 Was a variance approved for this well? Yes No
 If yes, what was the variance for? _____
 Location (see instructions on page 2): _____ WWM or EWM
SW 1/4 of the NE 1/4; Section 34 Township 36 Range 38
 Latitude (Example: 47.12345) 48.57596
 Longitude (Example: -120.12345) -118.00795

Driller's Log/Construction or Decommission Procedure
 Formation: Describe by color, character, size of material and structure, and the kind and nature of the material in each layer penetrated, with at least one entry for each change of information. Use additional sheets if necessary.

Material	From	To
SILTY GRAVELS COBBLES	0	6
BROWN CLAY	6	12
BROWN SAND	12	19
GRAY CLAY	19	80
BLACK SHALE	80	224
SEEPAGE BLACK SHALE	224	260
DARK GRAY SHALE	260	315
FRACTURES	315	325
DARK GRAY SHALE	325	420

RECEIVED

SEP 28 2020

Department of Ecology
Eastern Washington Office

Start Date 09/04/2020 Completed Date 09/09/2020

WELL CONSTRUCTION CERTIFICATION: I constructed and/or accept responsibility for construction of this well, and its compliance with all Washington well construction standards. Materials used and the information reported above are true to my best knowledge and belief.

Driller Trainee PE - Print Name JOHN ARFMAN
 Signature _____
 License No. 2673
 IF TRAINEE: Sponsor's License No. _____
 Sponsor's Signature _____

Drilling Company FOGLE PUMP & SUPPLY, INC.
 Address 2250 NORTH HIGHWAY
 City, State, Zip COLVILLE, WA 99114
 Contractor's
 Registration No. FOGLEPS095L4 Date 09/09/2020

The Department of Ecology does NOT warrant the data and/or information on this well report.

Water test for new well

Anatek Labs, Inc.

1282 Alturas Drive - Moscow, ID 83843 - (208) 883-2839 - Fax (208) 8829246 - email moscow@anateklabs.com
504 E Sprague Ste. D - Spokane, WA 99202 - (509) 838-3999 - fax (509) 838-4433 - email spokane@anateklabs.com

Client: Fogle Pump & Supply - Colville
Address: 2250 N. Hwy. 395
Colville, WA 99114
Attn: Kenny C

Work Order: WAK0127
Project: William C. Hoing
Reported: 11/13/2020 09:19

Analytical Results Report

Sample Location: 720 Deer Meadow Way, Kettle Falls, WA, 99141
Lab/Sample Number: WAK0127-01 **Collect Date:** 11/04/20 07:30
Date Received: 11/04/20 10:30 **Collected By:** William Hoing
Matrix: Drinking Water

Analyte	Result	Units	PQL	MCL	Analyzed	Analyst	Method	Qualifier
Microbiology								
E. coli	Absent		1.00		11/5/20 9:00	MMS	SM 9223 B	
Total Coliform	Absent		1.00		11/5/20 9:00	MMS	SM 9223 B	
Inorganics								
Nitrate-N	5.11	mg/L	0.100	10	11/4/20 14:08	BAS	EPA 300.0	
Metals by ICP-MS								
Arsenic	ND	mg/L	0.00100	0.01	11/10/20 12:31	TRC	EPA 200.8	
Lead	0.00109	mg/L	0.00100	0.015	11/10/20 12:31	TRC	EPA 200.8	
Uranium(mass)	6.73	ug/L	1.00	30	11/10/20 12:31	TRC	EPA 200.8	

Authorized Signature,

Karice Scott For Kathleen Sattler, Laboratory Manager

- PQL Practical Quantitation Limit
- ND Not Detected
- MCL EPA's Maximum Contaminant Level
- Dry Sample results reported on a dry weight basis
- * Not a certified analyte

This report shall not be reproduced except in full, without the written approval of the laboratory
The results reported related only to the samples indicated.

OVER



Anatek Labs, Inc.

504 E Sprague Ave Ste D
Spokane WA 99202
(509) 838-3999 FAX 838-4433

1282 Alturas Drive
Moscow ID 83843
(208) 883-2839 FAX 882-9246

EPA# WA00169

EPA# ID00013

Turn Around Time *Rush Charges Ap

Normal Next Day* 2-Day*
email _____

Please fill out completely and legibly

Date Collected: 11/04/20
Time Collected: 7:30 AM
County: Stevens

Sample Purpose:
 Purchase/Sale/Bldg Permit
 Informative
 New Well # 34199

Sample Type:
 Standard Drinking Water
 Raw Source Water
 Other (Specify) FOGLE PUMP COLVILLE

Client Name: William C. Hoing

Specific Location Where Sample Was Collected (i.e., address of well):
720 Deer Meadow Way
Kettle Falls WA 99141

Send Report to:
Name: William C Hoing
Address: 720 Deer meadow way

City: Kettle Falls St WA Zip: 99141

Day Tel #: 509-393-3322 Fax #: _____

Sample Collected by: William Hoing Company: _____

Source Type (Check One)
 Well/Well Field Purchased or Intertie
 Spring Grd. Water under Surface Influence
 Surface Water Combination or Other

COLIFORM BACTERIA (Lab Use Only)

SATISFACTORY (COLIFORM ABSENT)

REPEAT SAMPLES REQUIRED
 Unsatisfactory (Coliform Present)
 Total Present Total Absent
 E.Coli Present E.Coli Absent

Other Lab Results
Total Coliform /100ml _____ E.Coli /100ml _____
Fecal Coliform /100ml _____ Plate Count /100ml _____

Another Sample Required
Sample Not Tested Because:
 Sample Too Old Test Unsuitable Because:
 Wrong Container TNTC
 Other Turbid Culture
 Excess Debris

Report Date _____ Lab Analyst _____

Date Received: 11/4/2020 Time: 1030 By: KPS

Inorganic Chemical Analysis Report

Tests	MCL*	Results	Units	Compliance Y/N	Initials
<input checked="" type="checkbox"/> Arsenic (As)	0.01		mg/L		
<input type="checkbox"/> Barium (Ba)	2.0		mg/L		
<input type="checkbox"/> Beryllium (Be)	0.004		mg/L		
<input type="checkbox"/> Cadmium (Cd)	0.005		mg/L		
<input type="checkbox"/> Calcium (Ca)	-		mg/L		
<input type="checkbox"/> Chloride (Cl)	250		mg/L		
<input type="checkbox"/> Chromium (Cr)	0.1		mg/L		
<input type="checkbox"/> Color	15		Color Units		
<input type="checkbox"/> Conductivity	700		umhos/cm 25°C		
<input type="checkbox"/> Copper (Cu)	1.3		mg/L		
<input type="checkbox"/> Corrosivity	-		-		
<input type="checkbox"/> Cyanide (CN)	0.2		mg/L		
<input type="checkbox"/> Fluoride (F)	4.0		mg/L		
<input type="checkbox"/> Hardness	-		mg/L as CaCO ₃		
<input type="checkbox"/> Iron (Fe)	0.3		mg/L		
<input checked="" type="checkbox"/> Lead (Pb)	0.015		mg/L		
<input type="checkbox"/> Magnesium (Mg)	-		mg/L		
<input type="checkbox"/> Manganese (Mn)	0.05		mg/L		
<input type="checkbox"/> Mercury (Hg)	0.002		mg/L		
<input type="checkbox"/> Nickel (Ni)	0.1		mg/L		
<input checked="" type="checkbox"/> Nitrate as N	10		mg/L		
<input type="checkbox"/> Nitrite as N	1.0		mg/L		
<input type="checkbox"/> pH	-		-		
<input type="checkbox"/> Selenium (Se)	0.05		mg/L		
<input type="checkbox"/> Silver (Ag)	0.1		mg/L		
<input type="checkbox"/> Sodium (Na)	-		mg/L		
<input type="checkbox"/> Sulfate (SO ₄)	250		mg/L		
<input type="checkbox"/> TDS	500		mg/L		
<input type="checkbox"/> TSS	-		mg/L		
<input type="checkbox"/> Turbidity	1.0		NTU		
<input checked="" type="checkbox"/> Uranium (U)	30		ug/L		
<input type="checkbox"/> Zinc (Zn)	5.0		mg/L		

MCL-Max. Contaminant Level TSS-Total Suspended Solids TDS-Total Dissolved Solids

OTHER ANALYSES REQUESTED

Inorganic Contaminants (IOC's)	
Volatile Organics (VOC's)	
Semivolatile Organics (SOC's)	
Private Well Test	
Iron Bacteria	

Laboratory Comments

LFS B-LR011V

Lab Supervisor Report Date

Anatek Log-in #

10560