

WATER WELL REPORT

The Department of Ecology does NOT Warranty the Data and/or the Information on this Well Report.

State of Washington Date Printed: 20-Nov-2007 Log No. 0
 Construction / Decommission: Original Construction Notice
283556

PROPOSED USE: DOMESTIC

TYPE OF WORK: Owners's Well Number: (If more than one well)
NEW WELL Method: **ROTARY**

DIMENSIONS Diameter of well: **6** inches
 Drilled **400** ft. Depth of completed well **400** ft.

CONSTRUCTION DETAILS: Casing installed **WELDED**

Liner installed: PVC	6 " Dia from	+1 ft. to	20 ft.
4 " Dia from	10 ft. to	400 ft.	
	" Dia from	ft. to	ft.
	" Dia from	ft. to	ft.

Perforations: Yes Used In: **LINER**
 Type of perforator used **SKILL SAW**
 SIZE of perforations 1/8 in. b 7 in.

120	Perforation from	100	ft. to	400	ft.
	Perforation from		ft. to		ft.
	Perforation from		ft. to		ft.

Screens: No K-Pac Location
 Manufacture's Name
 Type: Model No
 Diam. slot size from ft. to ft.
 Diam. slot size from ft. to ft.

Gravel/Filter packed: No Size of Gravel
 Material placed fro ft. to ft.

Surface seal: Yes To what depth **19** ft.
 Seal method: Material used in seal **BENTONITE**
 Did any strata contain unusable water **No**
 Type of water Depth of strata
 Method of sealing strata off

PUMP: Manufacture's name
 Type: H.P. **0**

WATER LEVELS Land-surface elevation above mean sea level: **0** ft.
 Static level **20** ft. below top of well Date **10/16/2007**
 Artesian Pressure lbs per square inch Date
 Artesian water controlled by

WELL TESTS: Drawdown is amount water level is lowered below static level.
 Was a pump test made **No** If yes, by whom

Yield	gal/min with	ft drawdown after	
Yield	gal/min with	ft drawdown after	
Yield	gal/min with	ft drawdown after	

Recovery data (time taken as zero when pump turned off)(water level measured from well top to water level)

Time:	Water Level	Time:	Water Level	Time:	Water Level

Date of test:
 Bailer test gal/min ft drawdown after hrs.
 Air test 5 gal/min w/ stem set at 399 ft. for 1 hours
 Artesian flow gpm Date
 Temperature of water Was a chemical analysis made **No**

CURRENT
 Notice of Intent No.: **WEO7449**
 Unique Ecology Well I.D. No **ALN835**
 Water Right Permit Number:
OWNER: SAILOR, CHARLES & KATHY
OWNER ADD 755 LINDSAY ROAD
COLVILLE, WA 99114
 Well Add **755 LINDSAY ROAD**
 City: **Colville, WA 99114** County: **Stevens**
 Location: **NW 1/4 NE 1/4 Sec 36 T 35 R 38E EW**
 Lat/Long: Lat Deg Lat Min/Sec
 (s, t, r still Long Deg Long Min/Se
REQUIRED)
 Tax Parcel No.: **1901704**

CONSTRUCTION OR DECOMMISSION PROCEDURE

Formation: Describe by color, character, size of material and structure. Show thickness of aquifers and the kind and nature of the material in each stratum penetrated. Show at least one entry for each change in formation.

Material	From	To
TOP SOIL	0	2
COBBLES SAND BROWN	2	16
GRANITE WHITE BROWN SOFT	16	62
GRANITE BROWN SOFT	62	106
GRANITE HARD WHITE BROWN W/WATER	106	263
S&P GRANITE SOFT	263	316
S&P GRANITE MED	316	400

RECEIVED

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Notes:
 DEPARTMENT OF ECOLOGY
 EASTERN REGIONAL OFFICE

Work starts **10/15/2007** Complete **10/16/2007**

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 are true to my best knowledge and belief

Driller Engineer Trainee

Name: **ANDY BAKER** License No.: **2892T**
 Signature: *Andy Baker*

If trainee, Licensed driller is: **ROD FOGLE** License No.: **1194**
 Licensed Driller Signature: *Rod Fogle*

Drilling Company:
NAME: FOGLE PUMP & SUPPLY, INC.
ADDRESS: 316 W. 5TH
Colville, WA 99114
 Phone: **509-684-2569** Toll Free: **800-533-6518**
 E-Mail: **jeanne@foglepump.com**
 FAX: **509-684-3032** WEB Site: **www.foglepump.com**

Contractor's
 Registration No.: **FOGLEPS095L4** Date Log Created: **11/12/200**