

WATER WELL REPORT

State of Washington Date Printed: **05-Dec-2005** Log No. **54005**
 Construction / Decommission: Original Construction Notice **188199**

CURRENT

Notice of Intent No.: **W211028**
 Unique Ecology Well I.D. No. **AKL349**
 Water Right Permit Number:

OWNER: **JOHNSON, CRAIG**

OWNER ADD **1003 7 BAYS MARINA RD**

DAVENPORT, WA 99122 DEPARTMENT OF ECOLOGY
 EASTERN REGIONAL OFFICE

Well Add **MILES RD**

City: **Davenport, WA 99122**

County: **Lincoln**

Location: **NE 1/4 NE 1/4 Sec 15 T 28 R 36E EW**

Lat/Long: Lat Deg Lat Min/Sec

(s, t, r still REQUIRED) Long Deg Long Min/Sec

Tax Parcel No.:

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
COARSE SAND SOME GRAVEL	0	28
FINE SILTY SAND	28	43
COARSE GRAVEL SAND	43	63
SILTY FINE SAND	63	76
BOULDER	76	78
GRAVEL	78	85
SANDY TAN CLAY	85	112
CLAY GRAY	112	312
COARSE GRAVEL SOME SAND W WATER	312	315
GRAY CLAY	315	317

Notes:

1-6" DRIVE SHOE USED

Work starte **11/08/2005**

Complete **11/09/2005**

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: **TODD LIVELY** License No.: **2321**

Signature: 

If trainee, Licensed driller is: License No.:

Licensed Driller Signature

Drilling Company:

NAME: **FOGLE PUMP & SUPPLY, INC.**

Shop: **AIRWAY HEI**

ADDRESS: **PO BOX 1450**

Airway Heights, WA 99001

Phone: **(509) 244-0846** Toll Free: **(888) 343-9355**

E-Mail: **akk@foglepump.com**

FAX: **(509) 244-2875** WEB Site: **WWW.FOGLEPUMP.COM**

Contractor's

Registration No.: **FOGLEPS095L4** Date Log Created: **11/19/200**

PROPOSED USE: **DOMESTIC**

TYPE OF WORK: Owners's Well Number: (If more than one well) **01**

NEW WELL

Method: **ROTARY**

DIMENSIONS Diameter of well: **6** inches
 Drilled **317** ft. Depth of completed well **317** ft.

CONSTRUCTION DETAILS:

Casing installed **WELDED**

Liner installed:

" Dia from ft. to ft. 6 " Dia from +2 ft. to 315 ft.

Perforations: **No** Used In:

Type of perforator used

SIZE of perforations in. b in.

Perforation from ft. to 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 **18** 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 **135** ft. below top of well Date **11/09/2005**

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

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

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Date of test: Bailer test gal/min ft drawdown after hrs.

Air test **20** gal/min w/ stem set at **315** ft. for **1.5** hours

Artesian flow gpm Date

Temperature of water Was a chemical analysis made **No**