File Original and First Copy with Department of Ecology
Second Copy — Owner's Copy
Third Copy — Driller's Copy

28/03-15C

WATER WELL REPORT

STATE OF WASHINGTON

Application No. G1-22321

Permit No.

(1) OWNER: Name Dept. of Natural Resources Address Olympia, Wa.

(2) LOCATION OF WELL: County Island Co. — ¼ ¼ Sec. 15 T. 28 N., R. 2 E W.M.

Bearing and distance from section or subdivision corner

(3) PROPOSED USE: Domestic ☐ Industrial ☐ Municipal ☒ Irrigation ☐ Test Well ☐ Other ☐

(4) TYPE OF WORK: Owner's number of well (if more than one) 2

New well ☒ Deepened ☐ Reconditioned ☐

Method: Dug ☐ Bored ☐ Cable ☐ Driven ☐ Rotary ☒ Jetted ☐

(5) DIMENSIONS: Diameter of well 10 inches.

Drilled 295 ft. Depth of completed well 295 ft.

(6) CONSTRUCTION DETAILS:

Casing installed: 10 " Diam. from +3 ft. to 287 ft.

Threaded ☐ " Diam. from ft. to ft.

Welded ☐ " Diam. from ft. to ft.

Perforations: Yes ☒ No ☐

Type of perforator used 10"

SIZE of perforations ¼ in. by 2 in.

70 perforations from 242 ft. to 246 ft.

perforations from ft. to ft.

perforations from ft. to ft.

Screens: Yes ☐ No ☒

Manufacturer's Name

Type Model No.

Diam. Slot size from ft. to ft.

Diam. Slot size from ft. to ft.

Gravel packed: Yes ☐ No ☒ Size of gravel:

Gravel placed from ft. to ft.

Surface seal: Yes ☒ No ☐ To what depth? 34 ft.

Material used in seal bentonite & cement

Did any strata contain unusable water? Yes ☒ No ☐

Type of water? blackish Depth of strata 10

Method of sealing strata off pressure grout

(7) PUMP: Manufacturer's Name

Type: H.P.

(8) WATER LEVELS: Land-surface elevation above mean sea level 192 ft.

Static level 190 ft. below top of well Date 5-5-80

Artesian pressure lbs. per square inch Date

Artesian water is controlled by (Cap, valve, etc.)

(9) WELL TESTS: Drawdown is amount water level is lowered below static level

Was a pump test made? Yes ☒ No ☐ If yes, by whom? A. Mauldin

Yield: 250 gal./min. with 0 ft. drawdown after 6 hrs.

" 250 " 0 " 6 "

" " " " "

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
3:30	230	3:33	200	3:34	190

Date of test 4-30-80

Bailer test 10 gal./min. with 0 ft. drawdown after 3 hrs.

Artesian flow g.p.m. Date

Temperature of water Was a chemical analysis made? Yes ☐ No ☐

(10) WELL LOG:

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

MATERIAL	FROM	TO
Brown Fill	0	5
Silty Clay & Sand	5	10
Blackish water		
Blue Clay & Sand	10	18
Blue Clay, Sand, Small Boulders	18	20
Blue Clay hard Small Gravel	20	72
Blue Clay Med. Sand & Gravel	72	163
Brown Clay, Med. Gravel	163	165
Brown Clay	165	180
Brown Clay Small Gravel	180	210
Rock w/ Quartz, Green & Black	210	213
water		
Cemented Sand w/ Blue Clay	213	220
Sand w/ Gravel	220	225
water		
Blue Clay, Med. Gravel	225	233
Black Sandy Clay	233	241
Gravel, Sand, Gray Clay	241	241½
Sandy Blue Gray Clay	241½	242
Large Gravel	242	246
water		
Heaving Sand & gravel	246	246½
Cemented Sandy Clay	246½	247
Cemented Sand Med. Gravel	247	250
Large Gravel w/ Sand	250	251
Small Layers Cemented sand &		
Med to large gravel	251	270
Hard Brown Shale	270	272
Cemented Sand & Gravel	272	295
Caving Cemented Sand & Gravel	287	295

Work started 4-1-80, 19 Completed 5-5, 19 80

WELL DRILLER'S STATEMENT:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

NAME Martel Well Drilling, Inc. (Person, firm, or corporation) (Type or print)

Address P.O. Box 905, Friday Harbor, Wa.

[Signed] (Well Driller)

License No. 0292 Date May 8, 19 80

(USE ADDITIONAL SHEETS IF NECESSARY)

ECY 050-1-20

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

WASHINGTON STATE DEPARTMENT OF ECOLOGY

Well Tagging Form

Unique Well Tag No: AGA 853

RECORD VERIFICATION (check one)

- [ ] Well Report available *(please attach this form to the well report and submit it to the Ecology Regional Office near you)*
- [ ] Verification inconclusive
- [ ] Well Report not available

see 2

WELL OWNERSHIP, IF DIFFERENT FROM WELL REPORT

First Name SCATCHET HEAD W. DIST Last Name

Street Address 76470 -X

City State

LOCATION OF WELL, IF DIFFERENT FROM WELL REPORT

Well Address SAMISH CT / MORLAND RD

City County

T N R WM Sec 1/4 of the

FOR AGENCY USE ONLY

Latitude

Longitude

- [ ] GPS
- [ ] Topographic Map
- [ ] Survey
- [ ] Computer generated

Elevation at land surface feet/meters *(circle one)*

- [ ] Digital Altimeter
- [ ] Topographic Map
- [ ] Other

Additional information, if available

- [ ] Location marked on topographic map *(please attach)*
- [ ] Location marked on air photo *(please attach)*

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

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

Additional information if available

☒ Location marked on topographic map *(please attach)*

☐ Location marked on air photo *(please attach)*

Water Right # G1 23621P Priority Date JAN 19, 1984

Circle one Application Permit Certificate Claim Exempt

WELL CHARACTERISTICS

Physical Description of Well (size of casing type of well housing etc) 10 inches

295 Ft static Level 209' (No Screen) perf 242-246

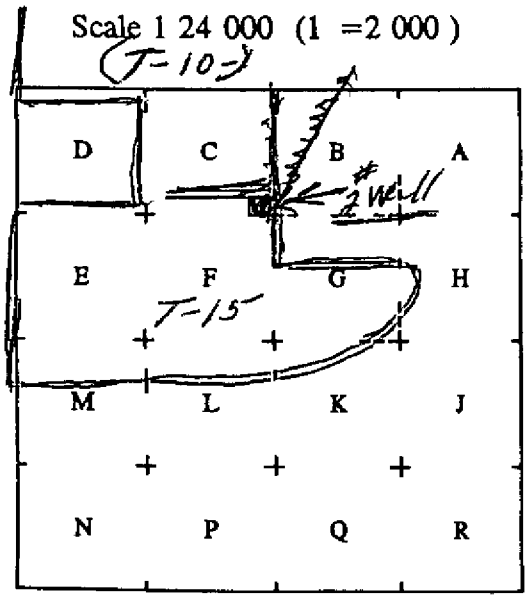
Location of Well Identification Tag ON CASING ON top OF well

Was Supplemental Tag needed for ease of identifying well?

☐ NO ☒ YES

If yes where was tag placed? ON CASING ON top OF well

Scale 1 24 000 (1 =2 000)



Indicate the location of the well within the Section by drawing a dot at that point

SECTION 10 & 15

COMMENTS

Pleas atta h this form to the W ll R p rt and ubmit it to the Department f E logy Wate R Pr g am H adquarters W ll Id tificatio P g am P O B 47600 Olympia WA 98504-7600

WATER WELL REPORT

STATE OF WASHINGTON

Application No. ____

Permit No. ____

(1) OWNER: Name Dept of Natural Resources Address Olympia W

(2) LOCATION OF WELL: County Island Co. — Sec. 15 T. 28 N R. 2 W.M

(3) PROPOSED USE: Domestic ☐ Industrial ☐ Municipal ☒ Irrigation ☐ Test Well ☐ Other ☐

(4) TYPE OF WORK: Owner's number of well (if more than one) 2
New well ☒ Method: Dug ☐ Bored ☐
Deepened ☐ Cable ☐ Driven ☐
Reconditioned ☐ Rotary ☒ Jetted ☐

(5) DIMENSIONS: Diameter of well 10 inches.
Drilled 295 ft. Depth of completed well 295 ft.

(6) CONSTRUCTION DETAILS:

Casing installed 10 Diam. from +3 ft. to 287 ft.
Threaded ☐ Diam. from ____ ft. to ____ ft.
Welded ☐ Diam. from ____ ft. to ____ ft.

Perforations Yes ☒ No ☐
Type of perforator used 10
SIZE of perforations ¼ in. by 2 in.
70 perforations from 242 ft. to 246 ft.
____ perforations from ____ ft. to ____ ft.
____ perforations from ____ ft. to ____ ft.

Screens: Yes ☐ No ☒
Manufacturer's Name ____
Type ____ Model No. ____
Diam. ____ Slot size ____ from ____ ft. to ____ ft.
Diam. ____ Slot size ____ from ____ ft. to ____ ft.

Gravel packed Yes ☐ No ☒ Size of gravel ____
Gravel packed from ____ ft. to ____ ft.

Surface seal Yes ☒ No ☐ To what depth? 4 ft.
Material used in seal bentonite & cement
Did any strata contain unpotable water Yes ☒ No ☐
Type of water blicksih Depth of strata 10
Method of sealing strata off pressure grout

(7) PUMP: Manufacturer's Name ____
Type ____ H.P. ____

(8) WATER LEVEL: Static level 190 ft. below top of well Date 5 5 80
Artesian pressure ____ lbs. per square inch Date ____
Artesian water is controlled by ____ (Cap, valve, etc.)

(9) WELL TESTS: Was a pump test made? Yes ☒ No ☐ If yes, by whom? Hauldin
Yield 250 gal./min. with 0 ft. drawdown after 6 hrs.

250	0	6

Recovery data (time measured from end of pump test when pump turned off) (water level measured from top of well)

Time	Water Level	Time	Water Level	Time	Water Level
5 30	230	5 34	200	5 54	190

Date of test 4 30 80
Bailer test 10 gal./min. with 0 ft. drawdown after 3 hrs.
Artesian flow ____ g.p.m. Date ____
Temperature of water ____ Was a chemical analysis made? Yes ☒ No ☐

(10) WELL LOG

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

MATERIAL	FROM	TO
Brown Fill	0	5
Silty Clay & Sand	5	10
Blackish water		
Blue Clay & Sand	10	18
Blue Clay, Sand, Small Boulders	18	20
Blue Clay hard Small Gravel	20	72
Blue Clay Med. Sand & Gravel	72	163
Brown Clay, Med. Gravel	16	165
Brown Clay	165	180
Brown Clay Small Gravel	180	210
Rock w/ Quartz, Green & Black	210	213
water		
Cemented Sand w/ Blue Clay	213	220
Sand w/ Gravel	220	225
water		
Blue Clay, Med. Gravel	225	233
Black Sandy Clay	233	241
Gravel, Sand, Gray Clay	241	241½
Sandy Blue Gray Clay	241½	242
Large Gravel	242	246
water		
Heaving Sand & gravel	246	246½
Cemented Sandy Clay	246½	247
Cemented Sand Med. Gravel	247	250
Large Gravel w/ Sand	250	251
Small Layers Cemented sand &		
Med to large gravel	251	270
Hard Brown Shale	270	272
Cemented Sand & Gravel	272	295
Caving Cemented Sand & Gravel	287	295

Work started 4 1 80 Completed 5 5 80

WELL DRILLER'S STATEMENT:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

NAME Martel Well Drilling Inc. (Person, firm, or corporation) (Typed or printed)

Address P O. Box 905, Friday Harbor, Wa.

[Signed] ____ (Well Driller)

License No. 0292 Date May 8 1980

(USE ADDITIONAL SHEETS IF NECESSARY)

Scatchet well No 2 ?

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

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

DESCRIPTION OF PROPOSED WORKS

G1-23621
Well No 2 (of 2) submersible pump 2-3000 g llon storage tanks and 4 and 6 mains to place of use

DEVELOPMENT SCHEDULE

	PL	W
Complete	Complete	Complete

REPORT

Background

Thi pplication to w thdraw 250 gpm from a well located about even miles south f Clinton n Whidbey I land for municipal supply was received on June 11 1980 from Scatch t Head Water Distr t Clinton Washington

Leg l tice a published in the Whidbey Island Record on August 12 and 19 1980 No prote ts have been received

In estig tion

A f eld examin ti n was cond cted on September 24 1984 The water system at Scatchet H d - consisting of two ell is compl t and in use It wa found as described in the pplication

Scatch t Head Community Club h p eviously made Application G1 20574 with pr ity date of Ap il 27 1973 for well No 1 f tl y tem (the well under instant pplication i well No 2) Well No 1 s located abo t 1500 feet southeast of well No 2 in SW¼NW¼ of Secti 15 Well No 2 in NE¼NW¼ of Section 15 i located about 850 feet south and 1278 feet west from the N¼ corner of Sec 15 T 28N R 3E W.M Island County

Mr Grov P ll Chairman of th water di trict wa interviewed by telephone on November 15 1984 and gave the following u fo nation Wells 1 and 2 are installed to the compl te sy tem Well No 1 y elds 90 gpm and well No 2 yields 125 gpm to th two 3000 g llon torage tanks The wells are pumped alten tely Booster pumps supply service p e sure from the tanks There are now about 175 homes using water with a potential f 483 Th sy tem is now called the Scatch t Head Water District The water from ell No 1 as described being of bad quality containing methane chlorides and other constituents which make the water unacceptable For this reason and to provide gre ter instantaneous quantity of water well No 2 was installed Water from the two well is mixed and tre ted to obtain water that is acceptable to the district Mr Peel requested that each well be granted a separate water right

The water well report for well No 2 shows that it was installed by Martel Well Drilling Inc Friday Harbor Washington The well is 10 inches in diameter and 295 feet deep It was completed on May 5 1980 with tati water level of 190 feet The well i ca ed from 3 feet above ground to 287 feet below and perfor ed from 242 feet to 246 feet no screen i indicated A pump t st by the driller on Ap l 30 1980 yi lded 250 gpm nth 40-foot drawdown in 6 hours w th the water level emaining stable t 230 feet for an additional 6 hours Recovery to 190 feet occurred in 4 minutes

Well No 2 is sited t an levation of about 202 feet above mean sea level The clos st altwater i Cultu Bay about 1800 f t to th southe t The bottom of the ell ca ing is thus abo t 85 f et below mean ea l l and th lowe t perforations in the asing bo t 44 feet below mean level

A port submitted by the pplicant hows water taken from well No 2 on December 16 1984 was found to contain 14 mg/L of chloride (Lauck s Testing Labs Seattle WA)

A review of th Department of Social and Health Services public water supply system li ting d ted January 19 1984 indicate that water usage reported in the pplicant area er g about 0 36 acre-foot per year per ervice Since the Department f Ecology Quantity Allocation Guidelin provide 0 5-1 0 acre-foot per year per service th 0 5 cre-foot per ervice will be allocated here G1-20574 provides 101 1 cre-feet so this well can p ovide the additional 140 4 acre-feet needed

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

Co lus o

It is co cluded that wat r va labl f r th be eficial appropriation s reque ted S ch ill not have an adver ffect exi ting ghts or be d trimental to th publ c welfare so l ng the well pump take and withdrawal rat are uch that th no degradatio f th quifer ed by pumping th well It is also con luded that th equ ted 250 gpm h ld be ed ed to th pumping t of 125 gpm Permit hould ther f re issu subject to exi ting r ghts and indicated pro i ons

Recommendatio

It i ecommended that permit be i ed f r 125 gpm 140 4 cre-feet per year (in ddition to G1 20574) for th community domesti supply - continuously - of 483 rv

Permittee r ts ucc ( ) hall ubmit in wr ting to the Department of Ecology Northwe t Reg o al Off ce Redmond Washingto during the months of April and A gu t ch year th chl ride co centr ti f th water pumped and tatic water l vel (pump ff) f th well tho ed by th permit Depending on th results f th data collection, the ithdr al f ground water under this permit may be limited other pprop iat ti may be required by Department f Ecology rder to prevent seawater intrusio into th subject aquifer

REPORT BY Jon Gauer DATE 3 27 85

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

WASHINGTON STATE DEPARTMENT OF ECOLOGY

UNIQUE WELL I D NUMBER A B R 4 1 7
X Y Z 1 2 3

WELL TAGGING FORM

Date of Field Visit 8/6/94 By E HUNTINGTON

ADDITIONAL WELL IDENTIFIERS

Department of Health System ID Number 76470 X Source Number SO 2

USGS Site Identification _____

RECORD VERIFICATION

- [x] Well Report available *(please attach)*
- [ ] Well Report not available
- [ ] Verification inconclusive

WELL OWNERSHIP, IF DIFFERENT FROM WELL REPORT

Name Scatchet Head Water Dist.

Street address P.O. Box 337

City Clinton State WA 98236

LOCATION OF WELL, IF DIFFERENT FROM WELL REPORT

Well Address Div. I Blk 12 Lot 18 No Mail Address

City Clinton County Island

T 28 N R 3E WM Sec 15 ___ ¼ of the ___ ¼

850 Ft South and 1278 Ft W from the N ¼ Corner of Sec. 15

Latitude ___° ___' ___"

Longitude ___° ___' ___"

- [ ] GPS (raw data)
- [ ] GPS (corrected)
- [x] Topographic Map
- [ ] Survey
- [ ] Computer generated
- [ ] Other ___

Elevation at land surface 202. feet/meters *(circle one)*

- [ ] Digital Altimeter
- [x] Topographic Map
- [ ] Other ___

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

Additional information, if available

☒ Location marked on topographic map *(please attach)*

☐ Location marked on air photo *(please attach)*

Water Right # G1-23621P Priority Date JAN. 19, 1984

Circle one Application Permit Certificate Claim Exempt

WELL CHARACTERISTICS

Physical Description of Well (size of casing, type of well, housing, etc) 10 inches

295 Ft. static level 209' (No screen) perf 242-246

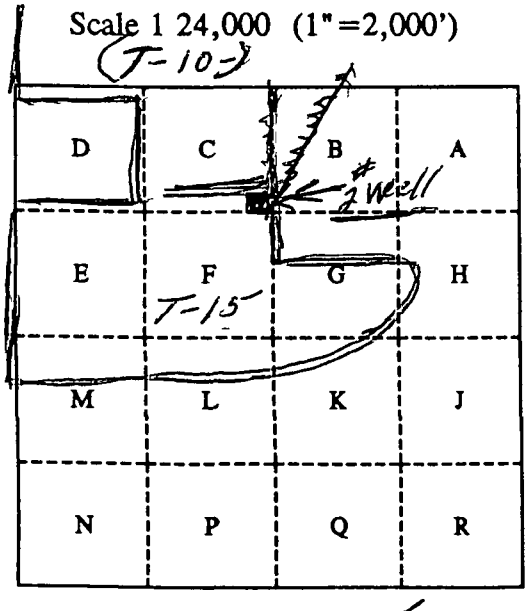
Location of Well Identification Tag ON CASING ON top of well

Was Supplemental Tag needed for ease of identifying well?

☐ NO ☒ YES

If yes, where was tag placed? ON CASING ON top OF well

Scale 1 24,000 (1"=2,000')



Indicate the location of the well within the Section by drawing a dot at that point

SECTION 10+15

COMMENTS:

Please attach this form to the Well Report and submit it to the Department of Ecology Water Resources Program Headquarters, Well Identification Program, P O Box 47600, Olympia, WA 98504-7600