33-01-3R

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

WATER WELL REPORT

STATE OF WASHINGTON

Start Card No. 075329

Water Right Permit No. _____

(1) OWNER: Name Bill MASSEY Address 7208 700 W OAK HARBOR 98277

(2) LOCATION OF WELL: County ISLAND SE ¼ SE ¼ Sec. 3 T. 33 N., R. 1E W.M.

(2a) STREET ADDDRESS OF WELL (or nearest address) West Moran Rd - OAK HARBOR WA.

(3) PROPOSED USE: [X] Domestic [ ] Irrigation [ ] DeWater Industrial [ ] Test Well [ ] Municipal [ ] Other [ ]

(4) TYPE OF WORK: Owner's number of well (if more than one) _____
Abandoned [ ] New well [X] Deepened [ ] Reconditioned [ ]
Method: Dug [ ] Cable [X] Rotary [ ] Bored [ ] Driven [ ] Jetted [ ]

(5) DIMENSIONS: Diameter of well 6 inches.
Drilled 103 feet. Depth of completed well 103 ft.

(6) CONSTRUCTION DETAILS:
Casing Installed: 6 " Diam. from 0 ft. to 97½ ft.
Welded [ ] _____ " Diam. from _____ ft. to _____ ft.
Liner installed [ ]
Threaded [ ] _____ " Diam. from _____ ft. to _____ ft.

Perforations: Yes [ ] No [X]
Type of perforator used _____
SIZE of perforations _____ in. by _____ in.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.

Screens: Yes [X] No [ ]
Manufacturer's Name Johnson
Type STAINLESS Model No. _____
Diam. 6 Slot size 10 from 97½ ft. to 103 ft.
Diam. _____ Slot size _____ from _____ ft. to _____ ft.

Gravel packed: Yes [ ] No [X] Size of gravel _____
Gravel placed from _____ ft. to _____ ft.

Surface seal: Yes [X] 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 _____

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

(8) WATER LEVELS: Land-surface elevation above mean sea level 60 + ft.
Static level 43 ft. below top of well Date Aug 90
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? _____
Yield: _____ gal./min. with _____ ft. drawdown after _____ hrs.
" " " "
" " " "

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 20 gal./min. with 20 ft. drawdown after 6 hrs.
Airtest [redacted] gal./min. with stem set at [redacted] ft. for [redacted] hrs.
Artesian flow _____ g.p.m. Date _____
Temperature of water _____ Was a chemical analysis made? Yes [ ] No [X]

(10) WELL LOG or ABANDONMENT PROCEDURE DESCRIPTION

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 information.

MATERIAL	FROM	TO
HARD PAN	0	58
SANDY HARD	58	70
MOSTLY SAND	70	90
CLEAN WATER SAND	90	103

RECEIVED
AUG 10 1990
DEPT. OF ECOLOGY

Work started Aug 8, 19 90 Completed Aug 10, 19 90

WELL CONSTRUCTOR 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.

NAME WHIDBEY DRILLERS (PERSON, FIRM, OR CORPORATION) (TYPE OR PRINT)
Address OAK HARBOR 98277
(Signed) [signature] (WELL DRILLER) License No. 129
Contractor's Registration No. WA 289 MM Date Aug 10, 19 90

(USE ADDITIONAL SHEETS IF NECESSARY)

ECY 050-1-20 (10/87) -1329- 3

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