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

32/3E-19J

Application No.

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

WATER WELL REPORT

STATE OF WASHINGTON

Permit No. G1-22790

(1) OWNER: Name Poeschel & Schultz Address 19203 Old Hwy 99 Arlington

(2) LOCATION OF WELL: County Island ___ ¼ ___ ¼ Sec. 19 T. 32 N., R. 3 W.M.

Bearing and distance from section or subdivision corner (991'S & 869'W of E ¼ COR - SEC 19)

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

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

(5) DIMENSIONS: Diameter of well 6 inches.
Drilled 260 ft. Depth of completed well 260 ft.

(6) CONSTRUCTION DETAILS:

Casing installed: 6" Diam. from 0 ft. to 255 ft.
Threaded ☐ ___" Diam. from ___ ft. to ___ ft.
Welded ☑ ___" Diam. from ___ ft. to ___ ft.

Perforations: Yes ☐ No ☑
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 ☑ No ☐
Manufacturer's Name Johnson
Type: Wire Model No. 304
Diam. 6 Slot size 18 from 255 ft. to 260 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? 20 ft.
Material used in seal bentonite - mud
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 .... 225 ft.
Static level 20 ft. below top of well Date 10/11/76
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? driller
Yield: 32 gal./min. with 5 ft. drawdown after 4 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
000	220				
001	224				

Date of test 10/11/76
Bailer test ___ gal./min. with ___ ft. drawdown after ___ hrs.
Artesian flow ___ g.p.m. Date ___
Temperature of water 50 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
gravel	0	20
hard pan	20	112
dry sand & gravel	112	190
yellow clay	190	196
dry coarse sand	196	224
coarse sand & water	224	260

RECEIVED JUL 24 1980 DEPT. OF ECOLOGY

Work started 9/30, 1976 Completed 10/11, 1976

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 Kounkel Well Drilling (Person, firm, or corporation) (Type or print)

Address 797 N Smith Rd Camano Is Wa 98292

[Signed] A G Kounkel (Well Driller)

License No. 0247 Date 7/20, 1980

(USE ADDITIONAL SHEETS IF NECESSARY)

Well Tagging Form

WASHINGTON STATE DEPARTMENT OF ECOLOGY

Unique Well Tag No: AKY 796

RECORD VERIFICATION (check/ one)

- [x] 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

PWS 00691L 501

WELL OWNERSHIP, IF DIFFERENT FROM WELL REPORT

First Name Terry Heights Water System Last Name

Street Address PO Box 673

City Stanwood State WA 98292

LOCATION OF WELL, IF DIFFERENT FROM WELL REPORT

Well Address Terry Heights Road Parcel R33219-154-4310

City Camano Island County Island

T 32 N R 3 E WM Sec 20 NW 1/4 of the SE

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)*

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FOR AGENCY USE ONLY

WELL CHARACTERISTICS

Description of well (size of casing, type of well, housing, etc.)

Drilled well - 6" casing

or Well identification Tag

Tag placed on well casing

plemental tag needed for ease of identifying well? ☐ Yes ☐ No

ere was tag placed?

C	B	A
F	G	H
L	K	J
P	Q	R

Scale 1.24,000 (1"=2,000')

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

SECTION 20

ITS

ECOLOGY WATER RESOURCES PROGRAM ONLY

t# Date Issued

ne Application Permit Certificate Claim Exempt