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. [redacted]

32/3/16n

Water Right Permit No.

(1) OWNER: Name MAX REINIG Address 2106 S. BREEZY POINT Rd. CAMANO IS. Wa.

(2) LOCATION OF WELL: County ISLAND SW ¼ SW ¼ Sec. 16 T. 32 N., R. 3E W.M.

(2a) STREET ADDDRESS OF WELL (or nearest address) 1244 MOORE Rd. CAMANO IS., WA. 98282

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

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

(5) DIMENSIONS: Diameter of well 6 inches.
Drilled 186 feet. Depth of completed well 180 ft.

(6) CONSTRUCTION DETAILS:
Casing installed: " Diam. from ft. to ft.
Welded ☑ 6 " Diam. from +2 ft. to 170 ft.
Liner installed ☐
Threaded ☐ " 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 S/STEEL Model No.
Diam. 6 Slot size 12 from 170 ft. to 180 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? 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 UNKNOWN
Type: H.P.

(8) WATER LEVELS: Land-surface elevation above mean sea level ft.
Static level 40 ft. below top of well Date 8/11/92
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 gal./min. with ft. drawdown after hrs.
Airtest 40 gal./min. with stem set at 178 ft. for 1 hrs.
Artesian flow g.p.m. Date
Temperature of water Was a chemical analysis made? Yes ☐ No ☑

(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
TOP SOIL	0	3
Hard PAN & COBBLES	3	60
SANDY CLAY & GRAVEL	60	98
GRAVEL	98	132
DRY SAND & GRAVEL	132	168
COARSE SAND & GRAVEL	168	186

RECEIVED
AUG 24 1992
DEPT. OF ECOLOGY

Work started 8/8/ 19 92 Completed 8/11/ 19 92

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 WATKINS WELL Drilling Co. (PERSON, FIRM, OR CORPORATION) (TYPE OR PRINT)

Address 556 N. SUNSET Dr. CAMANO IS. Wa.

(Signed) Ken Watkins (WELL DRILLER) License No. 0576

Contractor's Registration No. WATKIWD134P2 Date 8/11/ 19 92

(USE ADDITIONAL SHEETS IF NECESSARY)

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

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

08120 S01

WASHINGTON STATE DEPARTMENT OF ECOLOGY

Well Tagging Form

OK

Unique Well Tag No: AKY 748

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

WELL OWNERSHIP, IF DIFFERENT FROM WELL REPORT

First Name MAX REINIG + Last Name REINIG WATER SYSTEM

Street Address 2106 Breezy Point Road

City Camano Island State WA

LOCATION OF WELL, IF DIFFERENT FROM WELL REPORT

Well Address 1244 Moore Road (parcel R33216-089-0250)

City Camano Island County ~~Ed~~ Island

T 32 N R 3 E WM Sec 16 SW 1/4 of the SW

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

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

Outside of well house on west side - Vacant parcel - open field - next to Airport runway

n or Well Identification Tag

stropped to well casing

upplemental tag needed for ease of identifying well? ☐ Yes ☒ No

nere 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 16

N

ENTS

FOR ECOLOGY WATER RESOURCES PROGRAM ONLY

ght # Date Issued

one Application Permit Certificate Claim Exempt