30-3E-4P

WATER WELL REPORT

Original & 1st copy - Ecology, 2nd copy - owner, 3rd copy - driller

Construction/Decommission ("x" in circle) 191503

☒ Construction

○ Decommission *ORIGINAL CONSTRUCTION Notice of Intent Number* _____

CURRENT Notice of Intent No. W211251

Unique Ecology Well ID Tag No. AHN 318

Water Right Permit No. 244478

Property Owner Name El Camano Community Club

Well Street Address 2746 Fox ST.

City Camano Isl. County: Island (15)

Location SE 1/4- 1/4 SW 1/4 Sec. 4 Twn 30 R 3E EWM or WWM (circle one)

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

Tax Parcel No. S6545-00-00027-0

PROPOSED USE: ☒ Domestic ☐ Industrial ☐ Municipal ☐ DeWater ☐ Irrigation ☐ Test Well ☐ Other GROUP DOM.

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

☒ New Well ☐ Reconditioned ☐ Deepened

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

DIMENSIONS: Diameter of well 6 inches, drilled 192 ft.

Depth of completed well 192 ft.

CONSTRUCTION DETAILS

Casing Installed: ☒ Welded 6" Diam. from +2 ft. to 185 ft.

☐ Liner installed _____" Diam. from _____ ft. to _____ ft.

☐ Threaded _____" Diam. from _____ ft. to _____ ft.

Perforations: ☐ Yes ☒ No

Type of perforator used _____

SIZE of perfs _____ in. by _____ in. and no. of perfs _____ from _____ ft. to _____ ft.

Screens: ☒ Yes ☐ No ☐ K-Pac Location 182

Manufacturer's Name Alloy

Type S. STEEL Model No. _____

Diam. 5 Slot Size 10 from 183 ft. to 187 ft.

Diam. 5 Slot Size 14 from 187 ft. to 192 ft.

Gravel/Filter packed: ☐ Yes ☒ No ☐ Size of gravel/sand _____

Materials placed from _____ ft. to _____ ft.

Surface Seal: ☒ Yes ☐ No To what depth? 18 ft

Materials used in seal BENONITE

Did any strata contain unusable water? ☐ Yes ☒ No

Type of water? _____ Depth of strata _____

Method of sealing strata off _____

PUMP: Manufacturer's Name _____

Type: _____ H.P. _____

WATER LEVELS: Land-surface elevation above mean sea level _____ ft.

Static level 15.2 ft. below top of well Date 1/10/06

Artesian pressure _____ lbs. per square inch Date _____

Artesian water is controlled by _____ (cap,valve, etc.)

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.

Yield: _____ gal./min. with _____ ft. drawdown after _____ hrs.

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 10 gal./min. with 2 ft. drawdown after 2 hrs.

Airtest _____ gal./min. with stem set at _____ ft. for _____ hrs.

Artesian flow _____ g.p.m. Date _____

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

CONSTRUCTION OR DECOMMISSION PROCEDURE

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 information. Indicate all water encountered. (USE ADDITIONAL SHEETS IF NECESSARY.)

MATERIAL	FROM	TO
Top-soil	0	2
Br. SAND	2	138
Br. SANDY-clay	138	182
water-sand	182	192
Well siting per Island Co. code 809.07 C-DAE		

RECEIVED MAR 14 2006 DEPT. OF ECOLOGY

Start Date 12/19/05 Completed Date 1/10/06

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 above are true to my best knowledge and belief.

☒ Driller ☐ Engineer ☐ Trainee Name (Print) William Johns

Driller/Engineer/Trainee Signature William Johns

Driller or Trainee License No. 2239

Drilling Company Gene's Well Drilling

Address 5115 268th ST. N.W.

City, State, Zip Stanwood, WA 98292

Contractor's Registration No. GENESWD071CL Date 1/15/06

If trainee, licensed driller's Signature and License no. _____

Ecology is an Equal Opportunity Employer. ECY 050-1-20 (Rev 4/01)

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