273084

31-12-01

WATER WELL REPORT

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

Construction/Decommission *("x" in circle)*

(X) Construction

( ) Decommission *ORIGINAL INSTALLATION Notice of Intent Number* _____

CURRENT

Notice of Intent No. W238330

Unique Ecology Well ID Tag No. APR 969

Water Right Permit No. _____

Property Owner Name WAIF

Well Street Address SR 20 Accros Landfill

City Coupeville County Island

Location NW 1/4-1/4 NW 1/4 Sec 2 Twn 31 R 1 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. R13102-330-2001

PROPOSED USE: (X) Domestic ( ) Industrial ( ) Municipal ( ) DeWater ( ) Irrigation ( ) Test Well ( ) Other _____

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

(X) New well ( ) Reconditioned *Method:* ( ) Dug ( ) Bored ( ) Driven ( ) Deepened (X) Cable ( ) Rotary ( ) Jetted

DIMENSIONS: Diameter of well 6 inches, drilled 185 ft.

Depth of completed well 181 ft.

CONSTRUCTION DETAILS

Casing Installed: ( ) Welded 6" Diam. from +1.5 ft. to 171 ft.

( ) Liner installed _____" Diam. from _____ ft. to _____ ft.

( ) Threaded _____" Diam. from _____ ft. to _____ ft.

Perforations: ( ) Yes (X) No

Type of perforator used _____

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

Screens: (X) Yes ( ) No (X) K-Pac Location 170

Manufacturer's Name Johnson

Type Stainless Model No. Tele

Diam. 5 Slot size 8 from 171 ft. to 181 ft.

Diam. _____ Slot size _____ from _____ ft. to _____ ft.

Gravel/Filter packed: ( ) Yes (X) No ( ) Size of gravel/sand _____

Materials placed from _____ ft. to _____ ft.

Surface Seal: (X) Yes ( ) No To what depth? 18 ft.

Material used in seal Bentonite

Did any strata contain unusable water? ( ) Yes (X) 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 ~~9-6-07~~ ft. ?

Static level 130 ft. below top of well Date 9-6-07

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 (X) 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 30 ft. drawdown after 4½ 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 (X) 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. (USE ADDITIONAL SHEETS IF NECESSARY.)

MATERIAL	FROM	TO
Brown Hard pan	0	14
Sand & Gravel	14	65
Sand	65	95
Silty Sand	95	134
Gray Sandy Clay	134	161
Silty sand	161	181
Silty sandy Clay	181	185

Well site approved by Island Counte Health Dept 21-2-07

RECEIVED SEP 10 2007 DEPT. OF ECOLOGY

Start Date 9-3-07 Completed Date 9-6-07

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.

(X) Driller ( ) Engineer ( ) Trainee Name (Print) P. Boonstra

Driller/Engineer/Trainee Signature Gerald Boonstra

Driller or trainee License No. 0038

If TRAINEE,

Driller's Licensed No. _____

Driller's Signature _____

Drilling Company WHIDBEY DRILLERS

Address 716 Holbrook Rd

City, State, Zip Coupeville WA 98239

Contractor's Registration No. WHIDBWD944Q9 Date 9-6-07

Ecology is an Equal Opportunity Employer.

ECY 050-1-20 (Rev 3/05)

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

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