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

WASHINGTON STATE DEPARTMENT OF ECOLOGY

RECEIVED
JAN 05 2010
Dept of Ecology
WR-NWRO

33-1E-26F

WATER WELL REPORT
FOR AN EXISTING WELL

VFW Water System #90879R
This is Well #2 (S02)

INSTRUCTIONS:

Use this form if an original water well report was NEVER filed or is MISSING from Ecology records.

YOUR WELL MUST BE PROPERLY TAGGED PRIOR TO SUBMITTING THIS FORM. Please fill in all blanks as completely as possible. If information is not known leave blank. After completing, mail the original form to: WA State Department of Ecology, PO Box 47600, Olympia, WA, 98504-7600, ATTN: Marian Bruner.

CURRENT USE: ☒ Domestic ☐ Industrial ☐ Municipal ☐ DeWater ☐ Irrigation ☐ Test Well ☐ Other _____

DIMENSIONS: Diameter of well 6 inches. Depth of completed well 144 ft. if known.

CONSTRUCTION DETAILS
Liner installed ☐ Yes ☐ No ☒ Unknown
Type: ☐ PVC ☐ Steel ☐ Concrete Liner ☐ Other ☐ Unknown

Perforations ☐ Yes ☐ No ☒ Unknown
SIZE of perfs ____in. by ____in. and no. of perfs____ from____ft to ____ft.

Screens: ☐ Yes ☐ No ☒ Unknown Mf's name _____
Type: ☐ Stainless Steel ☐ PVC ☐ Other
Diam._____ Slot Size_____ from_____ft. to _____ft.

Gravel/Filter Packed: ☐ Yes ☐ No ☒ Unknown
Materials paced from _____ft. to _____ft.

Surface Seal: ☐ Yes ☐ No ☒ Unknown If know, to what depth _____ft
Materials used if known: _____ ☐ Bentonite ☐ Cement

PUMP: ☒ Yes ☐ No Mffr's Name _____
Type: Submersible H.P._____

WATER LEVELS: Land-surface elevation above mean sea level 146 ft.
Static Level_____ft. below top of casing Date measured_____
Artesian pressure _____lbs. per square inch Date measured_____
Well head has cap? ☒ Yes ☐ No Shut off valve? ☐ Yes ☐ No

WELL TESTS: Drawdown is amount water level is lowered below static level.
Was a pump test made? ☐ Yes ☐ No If yes, attach copy
☒ Unknown
Yield:____gal./min. with _____ft. drawdown after_____hrs.

Unique Ecology Well ID Tag No. BAA 999
Water Right? If yes, attach copy ☐ Yes ☒ No
Property Owner Name Veterans of Foreign Wars
Well Street Address 3037 N. Goldie Road
City Oak Harbor County: Island
Tax Parcel No R13326-314-2460

LOCATION
An accurate location of your well is very important. The Township, Range, Section and 1/4, 1/4 can be found on your legal description or through yor county assessor's office.
Sec 26 Twn 33N R 1E (EWM or WWM) Circle one

D	C	B	A
E	F	G	H
M	L	K	J
N	P	Q	R

This square represents one section of land, which is approx. 640 acres. Within this section, circle the letter that best represents the location of the well within this section.

well

Latitude/Longitude Note: Section, Township, Range still REQUIRED
Lat Deg 48 Lat Min/Sect 19.19584
Long Deg 122 Long Min/Sect 38.87779
☒ GPS ☐ Survey
☐ Topographic Map ☐ Computer Generated

Additional Information, if available:
☐ Location marked on topographic map (please attach)
☐ Location marked on air photo (please attach)

CERTIFICATION: The information reported above is true to the best of my knowledge and belief.

☐ Driller ☐ Engineer ☐ Property Owner ☒ Other
Name Vin Sherman
Signature Vin Sherman
Driller License No. _____
Date Signed 31 December 2009

~~Drilling Company~~ Island County Health Department
Address of person completing this form: PO Box 5000
City, State, Zip Coupeville, WA 98239

Original – Ecology

Ecology is an Equal Opportunity Employer.

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

WASHINGTON STATE DEPARTMENT OF ECOLOGY

Well Tagging Form

Unique Well Tag No: BAA 999

RECORD VERIFICATION (check ✓one)

☐ See attached Island County Hydrogeology Database Report
Well Report available (please attach this form to the well report and submit it to the Ecology Regional Office near you).
If a well report is not available, please complete a "Water Well Report for an Existing Well" form. This form is available at Ecology's headquarters office. **Do not use this form for wells that do not have a Water Well Report.**

WELL OWNERSHIP, IF DIFFERENT FROM WELL REPORT

First Name: Veterans of Foreign Wars Post 7392 (Well 502) Last Name:
water system ID # 90879R
Street Address: 3037 N. Goldie Road
City: Oak Harbor State: WA 98277

LOCATION OF WELL, IF DIFFERENT FROM WELL REPORT

Well Address: Parcel R13326-314-2460, 3037 N. Goldie Road
City: Oak Harbor County: WA
T. 33 N. R. 1 E W.M. Sec. 26 SE ¼ of the NW
Latitude 48 . 19 . 19584 "
Longitude 122 38 . 87779 "

Elevation at land surface 146 feet/meters *(circle one)*

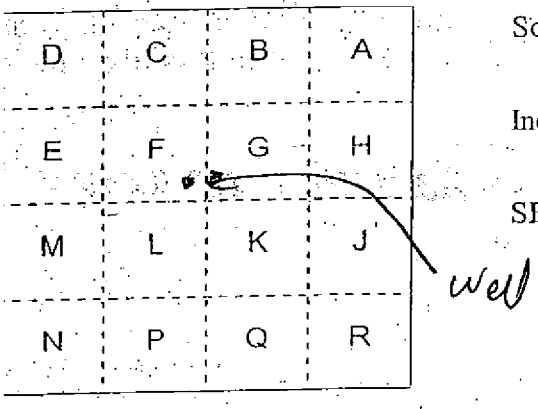
SEE BACK SIDE OF PAGE...

RECEIVED
DEC 28 2009
Dept of Ecology
WR-NWRO

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

WELL CHARACTERISTICS

Location of Well identification Tag:
Strapped to well casing inside well house #2
(south of pump house and well #1)



Scale 1:24,000 (1" = 2,000')

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

SECTION 26

COMMENTS:
Well #2 (S01) of a 2-well public water system
DoH Water System #90879R

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

Seawater Intrusion Rating 'Low' Risk

WATER WELL REPORT
State of Washington

IC Site ID: 4XW
Start Card:
Water Right:

Unique Well ID ~~AGA542~~ BAA999

(1) OWNER: Name: VFW Post 7392 Address: 3037 N Goldie Road Oak Harbor WA

(2) LOCATION OF WELL: Island: Whidbey Township/Range-Section: 33N/01E-26F Parcel Number: R13326-314-2460

(2a) Well Address 3037 N GOLDIE RD (from parcel address) PWS-ID: 90879R Source: 2 PWS-Name: Veterans of Foreign Wars, Post 7392

(3) PROPOSED USE:

(4) TYPE OF WORK: Owner's Well Number (if more than one): 2

Method:

(5) DIMENSIONS: Diameter of Well: inches.

Drilled: feet. Depth of Completed Well: 144 ft.

(6) CONSTRUCTION DETAILS:

Casing Installed: Diam. (in) from to (ft)

Screens: Type Zone Diam Slot from to (ft)

Surface seal:

Material: To depth: ft.

(7) PUMP:

Type: Horsepower:

(8) WATER LEVELS: 0 Land-surface elevation (MSL): ft.

AvgWL Elevation: Calc'd Elev: 146 ft.

Earliest Level: ft. below toc Date:

Lastest Level: ft. below toc Date:

Average Level: ft. below toc Average Date:

(9) WELL TESTS:

Type	Yield	Drawdown	After	Date

(10) WELL LOG DESCRIPTION:

Material	From BGS	From MSL	Thick

Work Completed: TD Elev: 2 ft. MSL

WELL CONSTRUCTOR CERTIFICATION:

Name: Unknown

Address:

Contractor's Registration Number:

Remarks: No well log avaiable, data from PWS files. Well XY adjusted for location on parcel.

Location Source: Parcel R13326-314-2460

North: 486750 East: 1558830

Latitd: 48 19.19584 Longit: 122 38.87779

Max CL: 35

Max NO3: 0

Generated by the Island County Hydrogeologic Database: 23-Dec-09

Disclaimer: Data presented has been collected from a variety of sources. Island County makes no guarantee as to the validity or accuracy of this data. Please report any errors to the Island County Hydrogeologist

Island County Hydrogeology Database