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

395203

30-2E-19K

WATER WELL REPORT

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

DEPARTMENT OF ECOLOGY State of Washington

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

☒ Construction

☐ Decommission *ORIGINAL INSTALLATION*

Notice of Intent Number _____

PROPOSED USE: ☒ Domestic ☐ Industrial ☐ Municipal ☐ DeWater ☐ Irrigation ☐ Test Well ☐ Other_____

TYPE OF WORK: Owner's number of well (if more than one) 8

☒ New well ☐ Reconditioned *Method:* ☐ Dug ☐ Bored ☐ Driven ☒ Cable ☐ Rotary ☐ Jetted ☐ Deepened

DIMENSIONS: Diameter of well 8 inches, drilled 107 ft. Depth of completed well 107 ft.

CONSTRUCTION DETAILS

Casing Installed: ☒ Diam.8 from +1.5 ft. to97 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 x☐ K-Pac Location _____

Manufacturer's Name _____

Type STAINLESS Model No.TELE

Diam.8 Slot size 12 from 97 ft. to 107 ft.

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

Material used in seal BENTONITE 3/8 CHIPS

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 166 ft.

Static level 85.4 ft. below top of well Date 11/1/2010

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 test15 gal./min. with 4 ft. drawdown after 3 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

CURRENT

Notice of Intent No. W 267943

Unique Ecology Well ID Tag No BBF 269

Water Right Permit No. _____

Property Owner Name Lagoon Point Water District

Well Street Address Smugglers Cove Rd

City Greenbank County Island

Location NW 1/4 1/4of the SE 1/4 Sec19 Twn30 R 2 EWM ☒ Or WWM ☐

(s, t, r Still REQUIRED)

Lat/Long Lat Deg _____ Lat Min/Sec _____
Long Deg _____ Long Min/Sec _____

Tax Parcel R 23019-275-2740

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.)

Matireal	FROM	TO
BROWN SAND	0	3
SILTY SAND	3	8
HARDPAN	8	52
COMPACT SAND&GRAVEL	52	94
WATER SAND CLEAN	94	101
WATER SAND SILTY	101	107
CLAY	107	
WELL SITE MEETS ALL SET BECKS		
REQIERMENTS UNDER ICC 8.09		
BASED ON INFORNATION FROM OWNER		

RECEIVED DEPARTMENT OF ECOLOGY DEC 20 2010 WATER RESOURCES PROGRAM NWRO

Start Date 10/25/2010 Completed Date 11/1/10

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) Gerlof Boonstra

Driller/Engineer/Trainee Signature Gerlof Boonstra

Driller or trainee License No. 0038

IF TRAINEE: Driller's License No:

Driller's Signature:

Drilling Company WHIDBEY WELL DRILLERS

Address 716 Holbrook Rd

City, State, Zip Coupeville , WA, 98239

Contractor's Registration No. WHIDBWD917DS Date 11/1/2010