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

417933

30-2E-11R

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) _____

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

DIMENSIONS: Diameter of well 6 inches, drilled 310 ft. Depth of completed well 310 ft.

CONSTRUCTION DETAILS

Casing Installed: ☒ Diam 6 from +1.5 ft. to 308 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: ☒ ☐ No x☐ K-Pac Location _____

Manufacturer's Name _____

Type _____ Model No.

Diam. Slot size from ft. to 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 ft.

Static level 176 ft. below top of well Date 6/22/11

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 ft. drawdown after 1 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 E 12984

Unique Ecology Well ID Tag No .BBF 287

Water Right Permit No. _____

Property Owner Name BABY ISLAND WATER ASSO

Well Street Address SARATOGA ROAD

City LANGLEY County Island

Location SE 1/4 1/4 of the SE 1/4 Sec 11 Twn 30 R 2 (EWM) ☒ Or WWM ☐

(s, t, r Still REQUIRED)

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

Tax Parcel S 6060-03-00005-00

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 SILTY SAND	0	2
SANDY CLAY	2	6
HARDPAN	6	42
SILTY SAND	42	62
CLAY	62	69
SILTY SAND	69	89
GRAY SAND&AND SOME GRAVEL(SL 94)	89	112
CLAY	112	125
GRAVELY CLAY	125	141
BROWN SILTY SAND	141	150
GRAY CLAY	150	192
SANDY CLAY	192	216
CLAY	216	246
SAND WITH SILT	246	253
SET A SCREEN HERE AFTER BAILING IT		
PRODUCES 3GPM MAX SL 176		
GRAVELY CLAY AND SILT	253	298
MOSTLY CLAY DRY	298	310

RECEIVED JUN 29 2011 WATER RESOURCES - NWRO

Start Date 6/9/11 Completed Date 6/23/11

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 _____

Driller or trainee License No. 0038

IF TRAINEE: Driller's License No: _____

Driller's Signature: Gerlof Boonstra

Drilling Company WHIDBEY WELL DRILLERS

Address 716 Holbrook Rd

City, State, Zip Coupeville, WA, 98239

Contractor's Registration No. WHIDBWD921RS Date 6/27/11

ECY 050-1-20 (Rev 06/08) *If you need this document in an alternate format, please call the Water Resources Program at 360-407-6600. Persons with hearing loss can call 711 for Washington Relay Service. Persons with a speech disability can call 877-833-6341.*