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

File Original and First Copy with Department of Ecology
Second Copy—Owner's Copy
Third Copy—Driller's Copy R 23118-248-2990

WATER WELL REPORT

STATE OF WASHINGTON

Start Card No. 043880

Water Right Permit No. _____

(1) OWNER: Name FIRE DIST 5 - J. Roberts Address WANAMAKER Rd Coup Mtn

(2) LOCATION OF WELL: County ISLAND NW ¼ SE ¼ Sec. 18 T. 31 N., R. 2E W.M.

(2a) STREET ADDDRESS OF WELL (or nearest address) WANAMAKER RD

(3) PROPOSED USE: [X] Domestic [ ] Irrigation [ ] DeWater Industrial [ ] Test Well [ ] Municipal [ ] Other [ ]

(4) TYPE OF WORK: Owner's number of well (if more than one) 1

Abandoned [ ] New well [X] Deepened [ ] Reconditioned [ ] Method: Dug [ ] Cable [X] Rotary [ ] Bored [ ] Driven [ ] Jetted [ ]

(5) DIMENSIONS: Diameter of well 6 inches.
Drilled 353 feet. Depth of completed well 353 ft.

(6) CONSTRUCTION DETAILS:

Casing installed: 6 " Diam. from 0 ft. to 343 ft.
Welded [X] _____ " Diam. from _____ ft. to _____ ft.
Liner installed [ ] _____ " Diam. from _____ ft. to _____ ft.
Threaded [ ]

Perforations: Yes [ ] No [X]
Type of perforator used _____
SIZE of perforations _____ in. by _____ in.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.

Screens: Yes [X] No [ ]
Manufacturer's Name JOHNSON
Type STAINLESS Model No. 304
Diam. 6 Slot size 10 from 343 ft. to 348 ft.
Diam. 6 Slot size 14 from 348 ft. to 353 ft.

Gravel packed: Yes [ ] No [X] Size of gravel _____
Gravel placed from _____ ft. to _____ ft.

Surface seal: Yes [X] No [ ] To what depth? 18 + ft.
Material used in seal BENTONITE
Did any strata contain unusable water? Yes [ ] No [X]
Type of water? _____ Depth of strata _____
Method of sealing strata off _____

(7) PUMP: Manufacturer's Name _____
Type: _____ H.P. _____

(8) WATER LEVELS: Land-surface elevation above mean sea level 300 + ft.
Static level 313' ft. below top of well Date Sept 71
Artesian pressure _____ lbs. per square inch Date _____
Artesian water is controlled by _____ (Cap, valve, etc.)

(9) 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.
" " " "
" " " "

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 20 gal./min. with 15 ft. drawdown after 4 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 [ ]

(10) WELL LOG or ABANDONMENT PROCEDURE DESCRIPTION

Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of information.

MATERIAL	FROM	TO
HARD PAN	0	57
CLAY GRAY	57	115
SANDY - DRY	115	150
GRAVEL	150	185
CLAY	185	220
GRAVEL CLAY	220	306
HARD PAN	306	341
WATER SAND-GRAVEL MIX	341	353

ISLAND COUNTY WELL SITE APPROVED

RECEIVED
DEPARTMENT OF ECOLOGY
MAY 23 2012
WATER RESOURCES PROGRAM
NWRO

Work started Sept 19 Completed Sept 19 71

WELL CONSTRUCTOR 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.

NAME WHIDBEY DRILLERS (PERSON, FIRM, OR CORPORATION) (TYPE OR PRINT)

Address OAK HARBOR WA

(Signed) [signature] (WELL DRILLER) License No. 127

Contractor's Registration No. [illegible] Date Sept 19 71

(USE ADDITIONAL SHEETS IF NECESSARY)

ECY 050-1-20 (10-87) -4329-