Department of Ecology
Second Copy — Owner's Copy
Third Copy — Driller's Copy

WATER WELL REPORT

STATE OF WASHINGTON

32/a-8H

Application No. EAC No 3 0/

Permit No G1-23218

(1) OWNER: Name DICK STEELE Address 1839 N. BECN OAK HARBOR

(2) LOCATION OF WELL: County ISLAND — SE ¼ NE ¼ Sec. 8 T 32 N., R 1E W.M.

Bearing and distance from section or subdivision corner (1000' N & 600' W OF E ¼ COR — SEC. 8)

(8) PROPOSED USE: Domestic ☐ Industrial ☐ Municipal ☑ Irrigation ☐ Test Well ☐ Other ☐

(9) TYPE OF WORK: Owner's number of well (if more than one) 2

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

DIMENSIONS: Diameter of well 6 inches.
Drilled 280 ft. Depth of completed well 280 ft.

CONSTRUCTION DETAILS:

Casing installed: 6 " Diam. from 0 ft. to 270 ft.
Threaded ☐ " Diam. from ft. to ft.
Welded ☑ " Diam. from ft. to ft.

Perforations: Yes ☐ No ☑
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 ☑ No ☐
Manufacturer's Name Johnson
Type Wire Model No. 304
Diam. 6 Slot size 10 from 270 ft. to 280 ft.
Diam. Slot size from ft. to ft.

Gravel packed: Yes ☐ No ☑ Size of gravel
Gravel placed from ft. to ft.

Surface seal: Yes ☑ No ☐ To what depth? 18+ ft.
Material used in seal clay
Did any strata contain unusable water? Yes ☐ No ☑
Type of water? Depth of strata
Method of sealing strata off

PUMP: Manufacturer's Name GOULD
Type: Sub H.P. 5 +050.

WATER LEVELS: Land-surface elevation above mean sea level (200') ft.
Static level 224' 6" ft. below top of well Date Aug 78
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? (BOB'S PUMPS)
Yield: 30 gal./min with 38 ft. drawdown after 4 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

(4 MIN, 35 SEC = FULL RECOVERY)

Date of test 9-27-78
Bailer test 20 gal./min with ft. drawdown after 4 hrs.
Artesian flow g.p.m. Date
Temperature of water Was a chemical analysis made? Yes ☐ No ☐

(10) WELL LOG:

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 formation.

MATERIAL	FROM	TO
HARD PAN	0	12
SANDY HARD PAN	12	37
HARD CLAY	37	84
SAND DRY	84	145
WATER SAND S.L. 139	145	153
SANDY CLAY	153	172
SAND DRY	172	190
SANDY CLAY	190	258
** WATER AQUIFER	258	280
CLAY CHUNKS	280	

(PUMP TEST INFO ADDED 1-2-80 — PER BOB'S PUMP DATA)

Work started Aug 1 1978 Completed Aug 25 1978

WELL DRILLER'S STATEMENT:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

NAME WHIDBEY DRILLERS (Person, firm, or corporation) (Type or print)

Address OAK HARBOR WASH

[Signed] (Well Driller)

License No. 129 Nov 1978

RECEIVED OCT 2 1979 DEPT. OF ECOLOGY REGIONAL OFFICE REDMOND, WA 98052

(USE ADDITIONAL SHEETS IF NECESSARY)

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: AGA 871

RECORD VERIFICATION (check one)

- [ ] Well Report available *(please attach this form to the well report and submit it to the Ecology Regional Office near you)*
- [ ] Verification inconclusive Sec #1
- [ ] Well Report not available

WELL OWNERSHIP, IF DIFFERENT FROM WELL REPORT

First Name N BOON WATER SYS Last Name

Street Address 18821-L

City State

LOCATION OF WELL, IF DIFFERENT FROM WELL REPORT

Well Address 1800 BOON HOLLOW RD

City County

T N R WM Sec 1/4 of the

FOR AGENCY USE ONLY

Latitude

Longitude

- [ ] GPS
- [ ] Topographic Map
- [ ] Survey
- [ ] Computer generated

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

- [ ] Digital Altimeter
- [ ] Topographic Map
- [ ] Other

Additional information, if available.

- [ ] Location marked on topographic map *(please attach)*
- [ ] Location marked on air photo *(please attach)*

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WELL CHARACTERISTICS

ysical Description of well (size of casing type of well housing etc.)

" CASING - CONCRETE PIPE W/CONCRETE LID. ADJACENT TO PUMPHOUSE

AND RESERVOIR WOODED TREA

PUMPHOUSE CEDAR BROWN (10'-14')

cation of Well identification Tag

CASING

as supplemental tag needed for ease of identifying well? ☐ Yes ☒ No

es where was tag placed? _____

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

Scale 1 24 000 (1 =2 000')

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

SECTION _____

MMENTS State Health

FOR ECOLOGY WATER RESOURCES PROGRAM ONLY

r Right # _____ Date Issued _____

e One Application Permit Certificate Claim Exempt