29/02-12E

File Original and First Copy with Department of Ecology
Second Copy — Owner's Copy
Third Copy — Driller's Copy

WATER WELL REPORT

STATE OF WASHINGTON

Application No.

Permit No. GI-21737

(1) OWNER: Name EMIL GABELEIN Address 5664 S. Mutiny Bay Rd. Freeland

(2) LOCATION OF WELL: County ISLAND — S.W. ¼ N.W. ¼ Sec. 12 T. 29 N., R. 2E W.M.

Bearing and distance from section or subdivision corner

(3) PROPOSED USE: Domestic ☒ Industrial ☐ Municipal ☐ Irrigation ☐ Test Well ☐ Other ☐

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

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

(5) DIMENSIONS: Diameter of well 8 inches.
Drilled 150 ft. Depth of completed well 150 ft.

(6) CONSTRUCTION DETAILS:

Casing installed: 8" Diam. from -2 ft. to 140 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 S.S. COOK
Type S.S. Model No.
Diam. 8 Slot size 17 from 140 ft. to 145 ft.
Diam. 8 Slot size 20 from 145 ft. to 150 ft.

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

Surface seal: Yes ☒ No ☐ To what depth? 20 ft.
Material used in seal
Did any strata contain unusable water? Yes ☐ No ☐
Type of water? Depth of strata
Method of sealing strata off

(7) PUMP: Manufacturer's Name STA-RITE
Type: SUB. H.P. 7½

(8) WATER LEVELS: Land-surface elevation above mean sea level ft.
Static level 95.6 ft. below top of well Date 3-15-67
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? DRILLER
Yield: 90 gal./min. with 3.6 ft. drawdown after 8 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 gal./min. with ft. drawdown after 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
TOP SOIL	0	3
SAND BROWN	3	30
SAND GREY	30	85
SANDY HARD PAN	85	100
SAND FINE W W	100	130
SAND COARSE W W	130	140
GRAVEL W W	140	150

DEC 4 1967

Work started 3-10, 19 67 Completed 3-15, 19 67

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 B & W DRILLING CO. (Person, firm, or corporation) (Type or print)

Address P.O. BOX 55 FREELAND WA 98249

[Signed] [illegible] (Well Driller)

License No. 265 Date 12-3, 19 84

(USE ADDITIONAL SHEETS IF NECESSARY)

ECY 050-1-20

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 959

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
- [ ] Well Report not available

SEC 2

WELL OWNERSHIP, IF DIFFERENT FROM WELL REPORT

First Name MAPLE GLEN COM ASSN Last Name

Street Address

City State

LOCATION OF WELL, IF DIFFERENT FROM WELL REPORT

Well Address CORNER OF MAPLE GLEN & NEWMAN

City County

T N R W M 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)*

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

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

FOR AGENCY USE ONLY

WELL CHARACTERISTICS

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

8' CASING PROTECTED WITH A CINDERBLOCK HOUSE &

METAL ROOF - TO THE SOUTH IS BRL #1 IN A WOOD/PANEL

SHED LOCATED IN THE BACK OF A YARD

cation of Well identification Tag

NASNA

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

is 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

FOR ECOLOGY WATER RESOURCES PROGRAM ONLY

Right # Date Issued

e One Application Permit Certificate Claim Exempt