Original and First Copy with Dept of Ecology
2nd Copy — Owner's Copy
3rd Copy — Driller's Copy

WATER WELL REPORT
STATE OF WASHINGTON

Well 2

Application No _____
Permit No _____

(1) OWNER: Name Westridge Comm Water Address _____

(2) LOCATION OF WELL. County ISLAND — NW ¼ NW ¼ Sec. 10 T 32 N, R 1 E 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 6 inches.
Drilled 264 ft. Depth of completed well 264 ft.

(6) CONSTRUCTION DETAILS:
Casing installed: 6" Diam. from 0 ft. to 250 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 STAINLESS Model No. _____
Diam. 6 Slot size 12 from 250 ft. to 260 ft.
Diam 6 Slot size 18 from 260 ft. to 264 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 _____

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

(8) WATER LEVELS Land-surface elevation above mean sea level NP 210' ft.
Static level 175 ft. below top of well Date JUNE 78
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 25 gal./min with 20 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	1	20
SANDY GRAVEL	20	50
SAND	50	118
SANDY CLAY	118	126
DIRTY SAND	126	149
SANDY CLAY	149	185
WATER SAND	185	192
CLAY	192	200
FINE WATER SAND	200	209
CLAY	209	228
WATER SAND	228	232
SANDY CLAY	232	247
WATER IN SAND	247	265

WEST RIDGE WATER SYSTEM PWS 94942 SRC 02
ISLAND Long 122 676346 Lat 48 282058
Well Tag AGA653

Work started ____ 19__ Completed JUNE 19 78

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 WN

[Signed] _____ (Well Driller)

License No 129 Date Nov 25, 1978

(USE ADDITIONAL SHEETS IF NECESSARY)

GY 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

02

Unique Well Tag No: AGA653

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

WELL OWNERSHIP, IF DIFFERENT FROM WELL REPORT

First Name WEST RIDGE W SYJ 94942-R Last Name

Street Address

City State

LOCATION OF WELL, IF DIFFERENT FROM WELL REPORT

Well Address Same

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.)

6" CASING HOUSED IN WOOD & w/SLOPED ROOF EAST IS SEC #1

PUMPHOUSE TO NE (~10'-12') AND PAINTED OFFWHITE/GREEN TRIM

SITE FENCED IN

cation of Well Identification Tag

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

FOR ECOLOGY WATER RESOURCES PROGRAM ONLY

r Right # _____ Date Issued _____

le One Application Permit Certificate Claim Exempt