

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



WATER WELL REPORT

Original & 1st copy - Ecology, 2nd copy - owner, 3rd copy - driller

Construction/Decommission ("x" in circle) **311367**

Construction
 Decommission ORIGINAL INSTALLATION Notice of Intent Number _____

CURRENT
 Notice of Intent No. WE 11220
 Unique Ecology Well ID Tag No. BBS 470
 Water Right Permit No. 54-004513CL
 Property Owner Name Phil Irwin
 Well Street Address _____

City Pateros County Okanogan
 Location NW 1/4-1/4 NE 1/4 Sec 28 Twn 30 R 23 WWM circle one
 Lat/Long (s, t, r) Lat Deg _____ Lat Min/Sec _____
 Still **REQUIRED** Long Deg _____ Long Min/Sec _____
 Tax Parcel No. 3023280047

PROPOSED USE: Domestic Industrial Municipal
 DeWater Irrigation Test Well Other: _____
 TYPE OF WORK: Owner's number of well (if more than one) _____
 New well Reconditioned Method: Dug Bored Driven
 Deepened Cable Rotary Jetted

DIMENSIONS: Diameter of well 8 inches drilled 66 ft.
 Depth of completed well 58'3" ft.

CONSTRUCTION DETAILS
 Casing Welded 8 " Diam. from 13 ft to 43 ft.
 Installed: 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: Yes No K-Pac Location 42'
 Manufacturer's Name Johnson
 Type Stainless steel Model No. _____
 Diam. 8 Slot size .630 from 43 ft. to 53 ft.
 Diam. 8 Slot size .640 from 53 ft. to 58 ft.

Gravel/Filter packed: Yes No Size of gravel/sand _____
 Materials placed from _____ ft. to _____ ft.

Surface Seal: Yes No To what depth 20 ft.
 Material used in seal bestonite slurry
 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 18'1" ft. below top of well Date 3-23-10
 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
to be test pumped
 Date of test _____
 Bailer test _____ gal./min. with _____ ft. drawdown after _____ hrs.
 Airtest 175+ gal./min. with stem set at 5' ft. for 3 hrs.
 Artesian flow _____ g.p.m. Date _____
 Temperature of water _____ Was a chemical analysis made? Yes No

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.)

MATERIAL	FROM	TO
sandy loam	0	4
silty sand & gravel	4	26
clayey sand & gravel	26	32
silty sand gravel & cobbles	32	50
siltier sand & gravel	50	58.5
granite	58.5	66

RECEIVED

APR 07 2010

DEPARTMENT OF ECOLOGY - CENTRAL REGIONAL OFFICE

Start Date 3-22-10 Completed Date 3-23-10

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) _____
 Driller/Engineer/Trainee Signature _____ CO: MVM QUALITY DRILLING LLC TEL (509) 662-1122
 NAME: MARSHALL V. MILLER LIC# 1437
 REG#: MVM QUD L033MM
 Driller or trainee License No. _____

If TRAINEE, Driller's Licensed No. _____
 Driller's Signature _____

Drilling Company MVM Quality Drilling, I L C
 Address 22905 Riverview Rd
 City, State, Zip Chelan, WA 98816

Contractor's Registration No. MVMQVDL033MM Date 3-24-10

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