

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

Water Right Permit No.

Start Card No. W 061098
UNIQUE WELL I.D. # ABM 772

(1) OWNER: Name Paul Layhre Address 4439 Whittier Clayton, WA 99110

(2) LOCATION OF WELL: County Stevens NE 1/4 SW 1/4 Sec 32 T 30 N. R. 42

(2a) STREET ADDRESS OF WELL (or nearest address)

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

(4) TYPE OF WORK: Owner's number of well (if more than one)
Abandoned ☐ New well ☒ Method: Dug ☐ Bored ☐
Deepened ☐ Cable ☐ Driven ☐
Reconditioned ☐ Rotary ☒ Jetted ☐

(5) DIMENSIONS: Diameter of well 6 inches.
Drilled 245 feet. Depth of completed well 245 ft.

(6) CONSTRUCTION DETAILS:
Casing installed: 6 Diam. from +2 ft. to 38 ft.
Welded ☐ 4 Diam. from 25 ft. to 245 ft.
Liner installed ☐
Threaded ☐ Diam. from _____ ft. to _____ ft.

Perforations: Yes ☐ No ☐
Type of perforator used Skill saw
SIZE of perforations 1/16 in by 5 in.
50 perforations from 140 ft. to 240 ft.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.

Screens: Yes ☐ No ☒
Manufacturer's Name _____ Model No. _____
Type _____ Diam. _____ Slot size _____ from _____ ft. to _____ 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? 20 ft.
Material used in seal Bentonite
Did any strata contain unusable water? Yes ☐ No ☒
Type of water? _____ Depth of strata _____
Method of sealing strata off _____

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

(8) WATER LEVELS: Land-surface elevation _____ ft.
Static level 10 ft. below top of well Date _____
Artesian pressure _____ lbs. per square inch Date _____
Artesian water is controlled by _____ (Cap. valve, etc.)

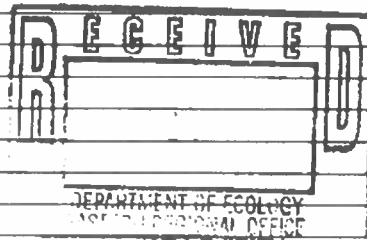
(9) WELL TESTS: Drawdown is amount water level is lowered below static level
Was a pump test made? Yes ☐ No ☐ If yes, by whom? _____
Yield: _____ gal./min. with _____ ft. drawdown after _____ hrs.
" " " "
" " " "
Recovery data (time taken as zero when pump turned off) (water level measured from well top to water level)
Time Water Level Time Water Level Time Water Level

Date of test _____
Bailer test _____ gal./min. with _____ ft. drawdown after _____ hrs.
Artest 5 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 aquifer 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
Top soil	0	2
Clay gray	2	25
Dec granite soft	25	35
Dec granite med	35	60
Granite med S&P	60	200
Granite soft S&P	200	220
Granite med S&P	220	245



Work Started 8-10 19 _____ Completed 8-11 19 9

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 MTINDEN DRILLING INC. (PERSON, FIRM, OR CORPORATION) (TYPE OR PRINT)
Address N 31621 Cedar Deer Park, WA 99006
(Signed) Daren Menden License No. 2208 (WELL DRILLER)

Contractor's Registration No. MTNDEDI090J9 Date 8-19 19 95

(USE ADDITIONAL SHEETS IF NECESSARY)

Ecology is an Equal Opportunity and Affirmative Action employer. For special accommodation needs, contact the Water Resources Program at (206) 407-6600. The TDD number is (206) 407-6008.