

WATER WELL REPORT

Notice of Intent: W135112

Date Printed: 28-Dec-2000

Unique Well I.D. No.: AFN008

Log No. 0

84834

State of Washington

Water Right Permit Number:

(1) OWNER: **BRYAN, MICHAEL** Address **1031 SLIDE CREEK RD Colville, WA 99114**
 LOCATION OF WELL: County: **STEVENS** NE 1/4 SW 1/4 Sec 25 T 34 R 39E W.M.

(2a) Street Address of well:
 Tax Parcel No.: **2206100**

(3) PROPOSED USE: **DOMESTIC**

(4) TYPE OF WORK: Owners' Number of well
NEW WELL (If more than one well) **1**
 Date: **12/26/2000** Method: **ROTARY**

(5) DIMENSIONS: Diameter of well: **6** inches
 Drilled **70** ft. Depth of completed well **68** ft.

(6) CONSTRUCTION DETAILS: Casing installed **WELDED**
 6" Dia from +2 ft. to 63 ft.
 Liner installed: " Dia from ft. to ft.
 " Dia from ft. to ft. " Dia from ft. to ft.
 Perforations used? **No** Used In:
 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** K-Pac Location:
 Manufacture's Name **JOHNSON**
 Type: **STAINLESS** Model No.
 Diam. **5** slot size: **.012** from **63** ft. to **68** ft.
 Diam. slot size: from ft. to ft.

Gravel packed **No** Size of Gravel
 Gravel placed from ft. to ft.
 Surface seal **Yes** To what depth **18** ft.
 Seal method: Material used in seal **BENTONITE**
 Did any strata contain unusable water? **No**
 Type of water Depth of strata
 Method of sealing strata off

(7) PUMP: Manufacture's name
 Type: H.P. **0**

(8) WATER LEVELS: Land-surface elevation
 above mean sea level: **0** ft.
 Static level **50** ft. below top of well Date **12/14/2000**
 Artesian Pressure lbs per square inch Date
 Artesian water controlled by

(9) WELL TEST Drawdown is amount water level is lowered below static level.

Was a pump test made? **No** If yes, by whom
 Yield: gal/min with ft drawdown after

Recovery data: Test Date:

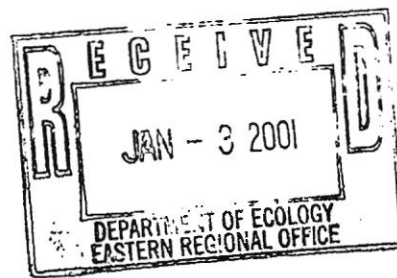
Time:	Water Level	Time:	Water Level	Time:	Water Level

Bailer test gal/min ft drawdown after hrs.
 Air test **10** gal/min w/ stem set at **67** ft. for **1** hours
 Artesian flow gpm Date
 Temperature of water Was a chemical analysis made **No**

(10) Well Log

Formation: Describe by color, character, size of material and structure. Show thickness of aquifers and the kind and nature of the material in each stratum penetrated. Show at least one entry for each change in formation.

Material	From	To
TOPSOIL	0	2
GRANITE BOULDER	2	5
CLAY BROWN W/GRAVEL	5	35
CLAYEY SAND BROWN	35	52
MEDIUM FINE SAND	52	70
GRANITE BLACK	70	70



Notes:

Work started **12/14/2000** Completed **12/14/2000**

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 are true to my best knowledge and belief.

DAVID MEYER License No.: **2427**
 (Driller/Licensed Engineer)

Trainee Name: License No.:
 NAME: **FOGLE PUMP & SUPPLY, INC.** Shop: **COLVILLE**
 ADDRESS: **316 W. 5TH**

Colville, WA 99114

Phone: **509-684-2569** Toll Free: **800-533-6518**

E-Mail:

FAX: **509-684-3032** WEB Site: **www.foglepump.com**

[SIGNED] *David C. Meyer* License No.: **2427**
 (Driller/Licensed Engineer)

Contractor's
 Registration No.: **FOGLEPS095L4** Date Log Created: **12/26/00**