## WATER WELL REPORT

Start Card No. 57176

STATE OF WASHINGTON

Water Right Permit No.

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(1)	OWNER: Name PETER GOODMAN	Address Brue Creek WA FOL	ELAI,	WHA
(2)	LOCATION OF WELL: County STEVENS		N., R	W.M.
(2a)	STREET ADDDRESS OF WELL (or nearest address)			
(3)	PROPOSED USE:  Domestic Industrial  Municipal	(10) WELL LOG or ABANDONMENT PROCEDURE DESCRIPTION  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 information.		
	□ DeWater Test Well □ Other □			
(4)	TYPE OF WORK: Owner's number of well (if more than one)	MATERIAL	FROM	то
	Abandoned  New well  Method: Dug  Bored	SAND + CLAY Brown	0	23
	Deepened	SAND + SIIT BrOWN	23	46
(5)	DIMENSIONS: Diameter of well 5 / X inches.	SAND & SIT GYAY	46	63
(3)	Drilled 75 feet. Depth of completed well 75 ft.	SAND COATSE & SITT GrAY	63	25
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(6)	CONSTRUCTION DETAILS:			1
	Casing mataned.			
	Liner installed			
_	THIOUSES TO			
	Perforations: Year No X			
	Type of perforations in. by in.			
	SIZE of perforations			
	perforations fromft, toft,			
	perforations fromft. toft.			
	Screens: Yes X No			-
	Manufacturer's Name JOHNSON			+
	Type STAINLESS Model No.			-
	Diam. 6 Slot size 14 from 70 ft. to 75 ft.		-	-
	DiamStot sizefromft, toft.			_
	Gravel packed: Yes No A Size of gravel			
	Gravel placed fromft. toft.			
	Surface seal: Yes No To what depth? 18 It.			
	Material used in seal BenToniTe			
	Did any strata contain unusable water? Yes No			
	Type of water?Depth of atrata			
	Method of sealing strata off			
(7)	PUMP: Manufacturer's Name			-
	Туре:			
(8)	WATER LEVELS: Land-surface elevation above mean sea level ft.			-
ζ,	Static level 25 tt. below top of well Date		-	+
	Artesian pressure lbs. per square inch Date			-
	Artesian water is controlled by(Cap, valve, etc.))	Work started 10/2 , 19. Completed 16/	2	. 19.90
(9)	WELL TESTS: Drawdown is amount water level is lowered below static level	Work started 10/2 , 19. Completed 16/	4	
	Was a pump test made? Yes No No If yes, by whom?	WELL CONSTRUCTOR CERTIFICATION:		
	Yield: 15 gal./min. with ft. drawdown after hrs.	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 Fogle PumP (PERSON, FIRM, OR CORPORATION) (TYPE OR PRINT)		
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	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			
	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7			
		Address 316 W 5Th Colville		
		Address 3/6 W J/A COLONIA		
	Date of test	(Signed) William B Vam License No. 1356		
	Bailer test gal./min. with ft. drawdown after hre.	(Signed) (WELL DRILLER)  Contractor's		
	Airtest gal./min. with stem set at ft. for hrs.	Registration		
	Artesian flow g.p.m. Date	No. PS 093L4 Date 10/2 , 19.13		
	Temperature of water Was a chemical analysis made? Yes No X	(LISE ADDITIONAL SHEETS IF NECES	SARY)	