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DEPARTMENT OF ECOLOGY
OCT 0 1 2025
WATER RESOURCES PROGRAM
EASTERN REGIONAL OFFICE

WATER WELL REPORT

DEPARTMENT OF ECOLOGY State of Washington

Type of Work:
☒ Construction
☐ Decommission ⟹ Original installation NOI No. _____

Notice of Intent No. WE60640
Unique Ecology Well ID Tag No. BQN963
Site Well Name (if more than one well): #3
Water Right Permit/Certificate No. _____
Property Owner Name STEPHEN SMITH
Well Street Address 2092 HOFMEISTER WAY
City EVANS County STEVENS
Tax Parcel No. 1960900
Was a variance approved for this well? ☐ Yes ☒ No
If yes, what was the variance for? _____

Proposed Use: ☒ Domestic ☐ Industrial ☐ Municipal ☐ Dewatering ☐ Irrigation ☐ Test Well ☐ Other _____

Construction Type: ☒ New well ☐ Alteration ☐ Deepening ☐ Other _____
Method: ☐ Driven ☐ Jetted ☐ Cable Tool ☐ Dug ☒ Air- ☐ Mud-Rotary

Dimensions: Diameter of boring 6 in., to 187 ft.
Depth of completed well 186 ft.

Construction Details:

Casing	Liner	Diameter	From	To	Wall Thickness	Steel	PVC	Welded	Thread
☒	☐	6 in.	+3	181	.250 in.	☒	☐	☒	☐
☐	☐	____ in.	____	____	____ in.	☐	☐	☐	☐
☐	☐	____ in.	____	____	____ in.	☐	☐	☐	☐
☐	☐	____ in.	____	____	____ in.	☐	☐	☐	☐

Location (see instructions on page 2): ☐ WWM or ☒ EWM
SW ¼-¼ of the SW ¼; Section 9 Township 37 Range 38
Latitude (Example: 47.12345) 48.72121
Longitude (Example: -120.12345) -118.03956

Perforations: ☐ Yes ☒ No Type of perforator used _____
No. of perforations _____ Size of perforations _____ in. by _____ in.
Perforated from _____ ft. to _____ ft. below ground surface

Screens: ☒ Yes ☐ No ☒ K-Packer ⟹ Depth 174 ft.
Manufacturer's Name ALLOY MACHINE
Type STAINLESS Model No. _____
Diameter 5 in. Slot size 16 in. from 181 ft. to 186 ft.
Diameter 5 in. Slot size RISER in. from 177 ft. to 181 ft.

Sand/Filter pack: ☐ Yes ☒ No Size of pack material _____ in.
Materials placed from _____ ft. to _____ ft.

Surface Seal: ☒ Yes ☐ No To what depth? 18 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 _____

Pump: Manufacturer's Name _____ Type: _____
H.P. _____ Pump intake depth: _____ ft. Designed flow rate: _____ gpm

Water Levels: Land-surface elevation above mean sea level _____ ft.
Stick-up of top of well casing _____ ft. above ground surface
Static water level 58 ft. below top of well casing Date 08/26/2025
Artesian pressure _____ lbs. per square inch Date _____
Artesian water is controlled by _____ (cap, valve, etc.)

Well Tests:
Was a pumping test performed? ☒ No ☐ Yes ⟹ by whom? _____
Yield _____ gpm with _____ ft. drawdown after _____ hrs.
Yield _____ gpm with _____ ft. drawdown after _____ hrs.
Yield _____ gpm with _____ ft. drawdown after _____ hrs.
Recovery data (time = zero when pump is turned off – water level measured from well top to water level)

Time	Water Level	Time	Water Level	Time	Water Level

Date of pumping test _____
Bailer test _____ gpm with _____ ft. drawdown after _____ hrs.
Air test 20 gpm with stem set at 185 ft. for 1 hrs. Date 08/26/2025
Artesian flow _____ gpm
Temperature of water _____ ° F Was a chemical analysis made? ☐ Yes ☒ No

Driller's Log/Construction or Decommission Procedure
Formation: Describe by color, character, size of material and structure, and the kind and nature of the material in each layer penetrated, with at least one entry for each change of information. Use additional sheets if necessary.

Material	From	To
TOP SOIL	0	2
SAND GRAVEL BOULDER	2	75
BROWN CLAY	75	87
GRAY SAND W/ SOME GRAVEL	87	186
BEDROCK GRANITE	186	187

Start Date 08/25/2025 Completed Date 08/26/2025

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 ☐ Trainee ☐ PE – Print Name OLIVER HUNTSMAN
Signature
License No. 3446
IF TRAINEE: Sponsor's License No.
Sponsor's Signature

Drilling Company FOGLE PUMP & SUPPLY, INC.
Address 2250 NORTH HIGHWAY
City, State, Zip COLVILLE, WA 99114
Contractor's Registration No. FOGLEPS095L4 Date 08/26/2025

The Department of Ecology does NOT warranty the Data and/or information on this well report.