

WATER WELL REPORT



Type of Work:

Construction
Decommission Original installation NOI No.

Proposed Use: Domestic, Industrial, Municipal, Dewatering, Irrigation, Test Well, Other. Construction Type: New well, Alteration, Deepening, Method: Driven, Jetted, Cable Tool, Dug, Air, Mud-Rotary. Dimensions: Diameter of boring 6 in., to 475 ft. Depth of completed well 465 ft. Construction Details: Casing, Liner, Diameter, From, To, Thickness, Steel, PVC, Welded, Thread. Perforations: No. of perforations, Size of perforations, Perforated from. Screens: Manufacturer's Name, Type, Model No., Diameter, Slot size. Sand/Filter pack: Size of pack material. Surface Seal: To what depth? Material used in seal. Pump: Manufacturer's Name, Type, H.P., Pump intake depth, Designed flow rate. Water Levels: Land-surface elevation above mean sea level 1626 ft. Static water level 286 ft. below top of well casing. Well Tests: Was a pumping test performed? Yield, Recovery data, Date of pumping test, Bailer test, Air test, Artesian flow, Temperature of water.

Notice of Intent No. WE55737
Unique Ecology Well ID Tag No. BMG205
Site Well Name (if more than one well):
Water Right Permit/Certificate No.
Property Owner Name DANE WARNER
Well Street Address 781-H HIGHWAY 395 NORTH
City KETTLE FALLS County STEVENS
Tax Parcel No. 1928455
Was a variance approved for this well? Yes No
If yes, what was the variance for?
Location (see instructions on page 2): WWM or EWM
NW 1/4-1/4 of the NW 1/4; Section 21 Township 36 Range 38
Latitude (Example: 47.12345) 48.60944
Longitude (Example: -120.12345) -118.03868

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.

Table with 3 columns: Material, From, To. Rows include EXISTING, CEMENTED SAND GRAVELS, SAND GRAVEL BROWN SILT, LOOSE SAND GRAVEL BROWN SILT, REDDISH COMPACT DECAY BEDROCK.

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 JOHN ARFMAN
Signature
License No. 2673
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 04/12/2024

ECY 050-1-20 (Rev 08/19) If you need this document in an alternate format, please call the Water Resources Program at 360-407-6872. Persons with hearing loss can call 711 for Washington Relay Service. Persons with a speech disability can call 877-833-6341.