

Called 7/20/16 Resolution - Mail out Results

197164 called 7/25/16

Anatek Labs, Inc.
 504 E Sprague Ave Ste D Spokane WA 99202 (509) 838-3999 FAX 838-4433
 1282 Alkuras Drive Moscow ID 83843 (208) 883-2839 FAX 882-9246

Turn Around Time Normal Phone Mail Fax
 Results Needed by: / /
 FAX #

Please fill out completely and legibly

Date Collected: 7/11/16 Time Collected: 8:00 AM County: STEVENS

Sample Purpose:
 Purchase/Sale/Bldg Permit
 Informative
 New Well

Sample Type:
 Standard Drinking Water
 Raw Source Water
 Other (Specify)

Owner or Manager Name: LEO J. LARREW

Specific Location Where Sample Was Collected (i.e. address of well):
 6137 Coyote Canyon Rd - Fruitland, WA 99129

Send Report to:
 Name: LEO J. LARREW
 Address: 6137 Coyote Canyon Rd
 City: Fruitland ST WA Zip: 99129
 Day Tel #: 509-722-3219 Eve/Msg Tel #
 Sample Collected by: LEO LARREW Company:

Source Type (Check One):
 Well/Well Spring Purchased or Inter tie
 Spring Grd Water under Surface Influence
 Surface Water Combination or Other

Inorganic Chemical Analysis Report

| Tests | MCL | Results | Units | Compliance Y/N | Initials |
|---|--------|---------|---------------------------|----------------|----------|
| <input checked="" type="checkbox"/> Arsenic (As) | 0.01 | <0.001 | mg/L | Yes | ETL |
| <input type="checkbox"/> Barium (Ba) | 2 | | mg/L | | |
| <input type="checkbox"/> Beryllium (Be) | 0.004 | | mg/L | | |
| <input type="checkbox"/> Cadmium (Cd) | 0.0005 | | mg/L | | |
| <input type="checkbox"/> Calcium (Ca) | | | mg/L | | |
| <input type="checkbox"/> Chloride (Cl) | 250 | | mg/L | | |
| <input type="checkbox"/> Chromium (Cr) | 0.1 | | mg/L | | |
| <input type="checkbox"/> Color | 15 | | Color Units | | |
| <input type="checkbox"/> Conductivity | 700 | | umhos/cm 25°C | | |
| <input type="checkbox"/> Copper (Cu) | 1.3 | | mg/L | | |
| <input type="checkbox"/> Corrosivity | | | | | |
| <input type="checkbox"/> Cyanide (CN) | 0.2 | | mg/l | | |
| <input type="checkbox"/> Fluoride (F) | 4 | | mg/L | | |
| <input type="checkbox"/> Hardness | | | mg/L as CaCo ₃ | | |
| <input type="checkbox"/> Iron (Fe) | 0.3 | | mg/L | | |
| <input checked="" type="checkbox"/> Lead (Pb) | 0.015 | <0.001 | mg/L | Yes | ETL |
| <input type="checkbox"/> Magnesium (Mg) | | | mg/L | | |
| <input type="checkbox"/> Manganese (Mn) | 0.05 | | mg/L | | |
| <input type="checkbox"/> Mercury (Hg) | 0.002 | | mg/L | | |
| <input type="checkbox"/> Nickel (Ni) | 0.1 | | mg/L | | |
| <input checked="" type="checkbox"/> Nitrate as N | 10 | 0.448 | mg/L | Y | mm |
| <input type="checkbox"/> Nitrite as N | 0.5 | | mg/L | | |
| <input type="checkbox"/> pH | | | | | |
| <input type="checkbox"/> Selenium (Se) | 0.05 | | mg/L | | |
| <input type="checkbox"/> Silver (Ag) | 0.05 | | mg/L | | |
| <input type="checkbox"/> Sodium (Na) | | | mg/L | | |
| <input type="checkbox"/> Sulfate (SO ₄) | 250 | | mg/L | | |
| <input type="checkbox"/> TDS | 500 | | ug/L | | |
| <input type="checkbox"/> TSS | | | mg/L | | |
| <input type="checkbox"/> Turbidity | 1 | | NTU | | |
| <input checked="" type="checkbox"/> Uranium (U) | 30 | 1.58 | ug/L | Yes | ETL |
| <input type="checkbox"/> Zinc (Zn) | 5 | | mg/L | | |

COLIFORM BACTERIA (Lab Use Only)

SATISFACTORY (COLIFORM ABSENT)
 Unsatisfactory (Coliform Present)

REPEAT SAMPLES REQUIRED:
 Total Present Total Absent
 E.Coli Present E.Coli Absent

Other Lab Results:
 Total Coliform /100ml E.Coli /100ml
 Fecal Coliform /100ml Plate Count /100ml

Sample Not Tested Because:
 Sample Too Old Wrong Container Other

Test Unsuitable Because:
 TNTC Turbid Culture Excess Debris

Report Date: 7-12-16 Lab Analyst: JO
 Date Received: 7-11-16 Time: 1405 By: KAS

MCL-Max. Contaminant Level TSS-Total Suspended Solids TDS-Total Dissolved Solids

OTHER ANALYSES REQUESTED:
 Inorganic Contaminants (IOC's)
 Volatile Organics (VOC's)
 Semivolatile Organics (SVC's)
 Private Well Test
 Iron Bacteria

Laboratory Comments:

Lab Supervisor: Kathleen A. Sattler Report Date: 7-19-16

Anatek Log-in #: 1331220

WATER WELL REPORT

State of Washington Date Printed: 07-Jun-2010 Log No. 0
 Construction / Decommission: Original Construction
 Construction Notice of Intent #:

CURRENT
 Notice of Intent No.: WE11506
 Unique Ecology Well I.D. No. BBL623
 Water Right Permit Number:
 OWNER: LARREW, LEO & MINNIE

OWNER ADDR 6153 COYOTE CANYON ROAD
 FRUITLAND, WA 99129

Well Add: 6137 COYOTE CANYON ROAD
 City: Fruitland, WA 99129 County: Stevens
 Location: SE 1/4 SW 1/4 Sec 09 T 29 R 37E EWM
 Lat/Long: Lat Deg Lat Min/Sec
 (S, L, r still) Long Deg Long Min/Sec
 REQUIRED)
 Tax Parcel No.: 1563300

PROPOSED USE: DOMESTIC

TYPE OF WORK: Owners's Well Number: (if more than one well) 2
NEW WELL Method: **ROTARY**

DIMENSIONS: Diameter of well: 6 inches
 Drilled 180 ft. Depth of completed well 180 ft.

CONSTRUCTION DETAILS: Casing installed: **WELDED**
 Liner installed: **PVC** 6" Dia from +2 ft. to 38 ft.
 4" Dia from 20 ft. to 180 ft. " Dia from ft. to ft.

Perforations: Yes Used In: **LINER**
 Type of perforator used **SKILL SAW**
 SIZE of perforations 1/4 in. by 6 in.
 80 Perforations from 80 ft. to 180 ft.
 Perforations from ft. to ft.
 Perforations from ft. to ft.

Screens: 0 K-Pac Location:
 Manufacture's Name
 Type: Model No.
 Diam. slot size: from ft. to ft.
 Diam. slot size: from ft. to ft.

Gravel/Filter packed: No Size of Gravel
 Material 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

PUMP: Manufacture's name
 Type: H.P. 0

WATER LEVELS: Land-surface elevation above mean sea level: 0 ft.
 Static level 30 ft. below top of well Date 05/25/2010
 Artesian Pressure lbs per square inch Date
 Artesian water controlled by


WELL TESTS: 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
 Yield: gal/min with ft drawdown after
 Yield: gal/min with ft drawdown after
 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 ft drawdown after hrs.
 Air test 1 1/2 gal/min w/ stem set at 179 ft for 1 hours
 Artesian flow gpm Date
 Temperature of water Was a chemical analysis made No

CONSTRUCTION OR DECOMMISSION PROCEDURE
 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 |
|----------------------------------|------|-----|
| TOP SOIL | 0 | 3 |
| DECOMPOSED GRANITE | 3 | 45 |
| GRANITE BROWN SOFT W/TRACE WATER | 45 | 54 |
| GRANITE S&P MED | 51 | 61 |
| FRAC W/ 1 1/2 GPM | 61 | 62 |
| GRANITE S&P HARD | 62 | 180 |

Notes:
 Work started 05/24/2010 Completed 05/25/2010

WELL CONSTRUCTION CERTIFICATION:
 I constructed and/or accept responsibility for construction of this well and its compliance with Washington well construction standards. Meter(s) used and the information reported are true to my best knowledge and belief.
 Driller Engineer Trainee

Name: **DAVID MEYER** License No.: 2427
 Signature: 
 Trainee Licensed driller is: License No.:
 Licensed Driller Signature:

Drilling Company:
 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: jeanne@foglepump.com
 FAX: 509-684-3032 WEB Site: www.foglepump.com
 Contractor's
 Registration No.: **FOGLEPS095L4** Date Log Created: 05/26/2010