

# WATER WELL REPORT

Start Card No. 109701

STATE OF WASHINGTON

Water Right Permit No \_\_\_\_\_

(1) OWNER: Name ALLEN CASSEL Address RT. 2 COLVILLE

(2) LOCATION OF WELL: County STEVENS NE. 1/4 Sec. 25 T. 38 N. R. 39 W.M.

(2a) STREET ADDRESS OF WELL (or nearest address) RT. 2 COLVILLE

(3) PROPOSED USE:  Domestic Irrigation  Industrial  Municipal   
 DeWater  Test Well  Other

(4) TYPE OF WORK: Owner's number of well (if more than one) \_\_\_\_\_  
Abandoned  New well  Method: Dug  Bored   
Deepened  Cable  Driven   
Reconditioned  Rotary  Jetted

(5) DIMENSIONS: Diameter of well 6 inches.  
Drilled 160 feet. Depth of completed well 160 ft.

(6) CONSTRUCTION DETAILS:  
Casing installed: 6" Diam. from +1 ft to 71 ft.  
Welded  Liner installed  Threaded   
Diam. from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

Perforations: Yes  No   
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  No   
Manufacturer's Name \_\_\_\_\_  
Type \_\_\_\_\_ Model No. \_\_\_\_\_  
Diam. \_\_\_\_\_ Slot size \_\_\_\_\_ from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
Diam. \_\_\_\_\_ Slot size \_\_\_\_\_ from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

Gravel packed: Yes  No  Size of gravel \_\_\_\_\_  
Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

Surface seal: Yes  No  To what depth? 20' 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 \_\_\_\_\_

(7) PUMP: Manufacturer's Name NO  
Type \_\_\_\_\_ HP \_\_\_\_\_

(8) WATER LEVELS: Land surface elevation above mean sea level \_\_\_\_\_ ft.  
Static level +1 ft below top of well Date \_\_\_\_\_  
Artesian pressure \_\_\_\_\_ lbs per square inch Date \_\_\_\_\_  
Artesian water is controlled by \_\_\_\_\_ (Cap. valve etc.)

(9) WELL TESTS: Drawdown is amount water level is lowered below static level  
Was a pump test made? Yes  No  If yes, by whom? \_\_\_\_\_  
Yield \_\_\_\_\_ gal. min with \_\_\_\_\_ ft drawdown after \_\_\_\_\_ hrs.

ESTIMATED 6-7  
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 with \_\_\_\_\_ ft drawdown after \_\_\_\_\_ hrs.  
Artest \_\_\_\_\_ gal. min with stem set at \_\_\_\_\_ ft for \_\_\_\_\_ hrs.  
Artesian flow \_\_\_\_\_ g.p.m. Date \_\_\_\_\_  
Temperature of water \_\_\_\_\_ Was a chemical analysis made? Yes  No

(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.

MATERIAL	FROM	TO
TOP SOIL	0	2
CLAY & GRAVEL (BROWN)	2	22
GRAY HARD CLAY	22	69
MED. SOFT GRAY & WHITE SAND	69	160
	71	

Work started \_\_\_\_\_ 19 \_\_\_\_\_ Completed \_\_\_\_\_ 19 \_\_\_\_\_

WELL CONSTRUCTOR 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.

NAME FOSLE Pump (PERSON, FIRM OR CORPORATION) (TYPE OR PRINT)

Address 314 W 5th Colville WA

(Signed) [Signature] License No. 1257

Contractor's Registration No. PS194.H.F Date 7-26 1988

FOSLE (USE ADDITIONAL SHEETS IF NECESSARY)