# WATER WELL REPORT

DEPARTMENT OF ECOLOGY State of Washington

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

Notice of Intent No. WE60793
Unique Ecology Well ID Tag No. BQS699
Site Well Name (if more than one well): _____
Water Right Permit/Certificate No. _____
Property Owner Name CHILTON INC.
Well Street Address BEEBE ROAD LOT 2
City CASTLE ROCK County COWLITZ
Tax Parcel No. WK2907004
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 642 ft.
Depth of completed well 642 ft.

**Construction Details:**

| Casing | Liner | Diameter | From | To | Wall Thickness | Steel | PVC | Welded | Thread |
|---|---|---|---|---|---|---|---|---|---|
| ☑ | ☐ | 6 in. | +1 | 59'4" | 0.250 in. | ☑ | ☐ | ☑ | ☐ |
| ☐ | ☑ | 4.5 in. | 22 | 642 | 0.250 in. | ☐ | ☑ | ☐ | ☐ |
| ☐ | ☐ | ____ in. | ____ | ____ | ____ in. | ☐ | ☐ | ☐ | ☐ |
| ☐ | ☐ | ____ in. | ____ | ____ | ____ in. | ☐ | ☐ | ☐ | ☐ |

**Perforations:** ☑ Yes ☐ No Type of perforator used SAW
No. of perforations 35 Size of perforations 1/4 in. by 6 in.
Perforated from 22 ft. to 642 ft. below ground surface

**Screens:** ☐ Yes ☑ No ☐ K-Packer ⟹ Depth ____ ft.
Manufacturer's Name _____
Type _____ Model No. _____
Diameter ____ in. Slot size ____ in. from ____ ft. to ____ ft.
Diameter ____ in. Slot size ____ in. from ____ ft. to ____ ft.

**Sand/Filter pack:** ☐ Yes ☑ No Size of pack material ____ in.
Materials placed from ____ ft. to ____ ft.

**Surface Seal:** ☑ Yes ☐ No To what depth? 57 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 380 ft. below top of well casing Date 09-10-2025
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 15 gpm with stem set at 642 ft. for 1 hrs. Date 09-10-2025
Artesian flow ____ gpm
Temperature of water ____ ° F Was a chemical analysis made? ☐ Yes ☐ No

Location (see instructions on page 2): ☐ WWM or ☐ EWM
SE ¼-¼ of the NE ¼; Section 29 Township 10N Range 2W
Latitude (Example: 47.12345) 46.32513
Longitude (Example: -120.12345) -122.95218

**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 |
| CLAY TAN | 2 | 12 |
| CLAY BROWN | 12 | 21 |
| SANDY CLAY TAN | 21 | 33 |
| SANDY CLAY & CLAYSTONE TAN | 33 | 50 |
| SHALE BLUE-GRAY TAN | 50 | 78 |
| ROCK BLACK WITH WHITE HARD | 78 | 137 |
| SANDY SILTSTONE GRAY MEDIUM | 137 | 163 |
| SANDSTONE MEDIUM BLUE | 163 | 210 |
| SILTSTONE COAL GRAY WITH BLACK | 210 | 247 |
| SILTSTONE GRAY MEDIUM | 247 | 433 |
| SANDSTONE GRAY-BLUE MEDIUM | 433 | 470 |
| SILTSTONE GRAY MEDIUM | 470 | 545 |
| SANDSTONE GRAY MEDIUM | 545 | 607 |
| SANDSTONE GRAY WITH BLACK MEDIUM | 607 | 642 |

Start Date 09-08-2025 Completed Date 09-10-2025

**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 ANDY ORTH
Signature _____
License No. 2345
IF TRAINEE: Sponsor's License No.
Sponsor's Signature

Drilling Company DALE MCGHEE & SONS WELL DRILLING, INC.
Address 4409 PLEASANT HILL ROAD
City, State, Zip KELSO, WA 98626
Contractor's Registration No. DALEMI*212MC Date 09-16-2025