WATER WELL REPORT

DEPARTMENT OF ECOLOGY State of Washington

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 ☐ Other _____
Method: ☐ Driven ☐ Jetted ☐ Cable Tool ☐ Dug ☒ Air- ☐ Mud-Rotary

Dimensions: Diameter of boring 6 in., to 642 ft.
Depth of completed well 602 ft.

Construction Details:

Casing	Liner	Diameter	From	To	Wall Thickness	Steel	PVC	Welded	Thread
☐	☐	____ in.	____	____	____ in.	☐	☐	☐	☐
☐	☐	____ in.	____	____	____ 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 503 ft. to 641 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? 19 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 175 ft. below top of well casing Date 04-16-2025
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 5 gpm with stem set at 602 ft. for 1 hrs. Date 04-16-2025
Artesian flow _____ gpm
Temperature of water _____ ° F Was a chemical analysis made? ☐ Yes ☐ No

Notice of Intent No. WE59372
Unique Ecology Well ID Tag No. BQS658
Site Well Name (if more than one well): _____
Water Right Permit/Certificate No. _____
Property Owner Name CHILTON INC.
Well Street Address 243 CASCADIA LANE
City WOODLAND County COWLITZ
Tax Parcel No. WC3614005
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 ¼-¼ of the SE ¼; Section 36 Township 6N Range 1W
Latitude (Example: 47.12345) 45.9583105
Longitude (Example: -120.12345) -122.7517780

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 RED	2	8
CLAY TAN-RED	8	15
CLAY WITH DECOMPOSED ROCK TAN-	15	18
BROWN-RED	-	-
ROCK GRAY-BLUE MEDIUM-HARD	18	27
ROCK RED AND GRAY MEDIUM	27	44
ROCK GRAY-BLUE MEDIUM	44	127
ROCK RED WITH GRAY MEDIUM	127	153
ROCK GRAY-BROWN MEDIUM	153	180
CLAYSTONE RED-BROWN MEDIUM-SOFT	180	205
ROCK GRAY-BROWN MEDIUM	205	273
ROCK BLUE-GRAY MEDIUM-HARD	273	315
ROCK BLACK MEDIUM-HARD	315	404
CLAYSTONE REDDISH BROWN MEDIUM-	404	418
ROCK GRAY-BROWN MEDIUM	418	475
ROCK BLACK WITH WHITE MEDIUM-HARD	475	505
ROCK GRAY WITH BROWN MEDIUM	505	555
ROCK BLACK WITH WHITE MEDIUM-HARD	555	642

Department of Ecology
APR 24 2025
Water Resources Program

Start Date 04-14-2025 Completed Date 04-16-2025

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 [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 04-21-2025