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 302 ft.
Depth of completed well 302 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.	42	302	0.250 in.	☐	☒	☐	☐
☐	☐	____ in.	____	____	____ in.	☐	☐	☐	☐
☐	☐	____ in.	____	____	____ in.	☐	☐	☐	☐

Perforations: ☒ Yes ☐ No Type of perforator used SAW
No. of perforations 21 Size of perforations 1/4 in. by 6 in.
Perforated from 243 ft. to 301 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 239 ft. below top of well casing Date 07-08-2025
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 302 ft. for 1 hrs. } Date 07-08-2025
Artesian flow ____ gpm
Temperature of water ____ °F Was a chemical analysis made? ☐ Yes ☐ No

Notice of Intent No. WE60173
Unique Ecology Well ID Tag No. BQS680
Site Well Name (if more than one well): _____
Water Right Permit/Certificate No. _____
Property Owner Name MADDIE HENDRICKSON
Well Street Address ACROSS FROM 4029 GREEN MOUNTAIN ROAD
City KALAMA County COWLITZ
Tax Parcel No. WC2503043
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
NE ¼-¼ of the SW ¼; Section 25 Township 6N Range 1W
Latitude (Example: 47.12345) 45.97425
Longitude (Example: -120.12345) -122.75286

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 WITH COBBLES	0	2
CLAY BROWN	2	10
CLAY TAN	10	27
CLAY BROWN-RED	27	43
DECOMPOSED ROCK & CLAY TAN-BROWN	43	50
ROCK BLUE-GRAY MEDIUM	50	97
CLAYSTONE BROWN MEDIUM-SOFT	97	112
ROCK BLUE-GRAY MEDIUM-HARD	112	124
CLAYSTONE TAN-BROWN MEDIUM-SOFT	124	145
ROCK GRAY-BROWN WITH WHITE MEDIUM	145	195
ROCK GRAY-BROWN WITH WHITE BROKEN	195	210
CLAYSTONE BROWN-RED MEDIUM	210	230
ROCK BROWN-GRAY WITH WHITE MEDIUM	230	238
BROKEN ROCK BROWN-GRAY WITH WHITE	238	243
ROCK BLUE-GRAY MEDIUM	243	278
ROCK BROWN-GRAY WITH WHITE BROKEN	278	293
ROCK BROWN-GRAY WITH WHITE MEDIUM	293	302

Start Date 07-07-2025 Completed Date 07-08-2025

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 Andy Orth
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 07-14-2025