

THURSTON COUNTY RECEIVED

WATER WELL/DEWATERING SYSTEM CONSTRUCTION PROCESS

MAY 24 2023

BUILDING DEVELOPMENT CENTER

After a well is constructed, re-constructed or decommissioned, a well report must be filed within 30 days to the Department of Ecology. Well reports are filled out by the person who constructed the well. This is typically a Washington State licensed well operator.

The following form is used for *water wells and dewatering systems only*. Below are the instructions for filling out a Water Well Report. After the Water Well Report form has been printed and filled out, it should be mailed to your Department of Ecology Regional Office.

INSTRUCTIONS (Fill in all fields, unless noted)

- 1. **Current Notice of Intent No.** The number issued by the Department of Ecology for tracking purposes (e.g., W123456). Should start with a W, A or D for this form.
- 2. **Unique Ecology Well ID Tag No.** The number issued by the Department of Ecology that is stamped on a metal tag that is attached to the actual well. (e.g., AAA-000)
- 3. Water Right Permit No. If the well will use more than 5,000 gallons per day or irrigate more than ½ acre of land, you must have a water right permit. This number should be written here.
- 4. **Property Owner Name** The name of the property owner.
- 5. **Well Street Address** The physical address where the well is located. (Note: NOT the mailing address.)
- 6. **City** City where the well is located.
- 7. **County** County where the well is located.
- 8. **Location** The ½, ¼, section, township and range of the well. This location information can be found from a title/deed or the county assessor's office. Many maps show this information. (E.g., NE1/4, NE1/4, S10, T20N, R05E/W)
- 9. **Lat/Long** Using a GIS, you may enter the latitude and longitude of the well. Please use minutes and seconds. *Note: This is NOT a required field.*
- 10. Tax Parcel No. The tax parcel number of the property issued by the county.
- 11. **Construction/Decommission** This form is used for BOTH construction and decommissioning of a well. Please check the appropriate box. For decommissioning enter the original construction Notice of Intent No. here (if available).
- 12. **Proposed Use** Self explanatory. Check appropriate box.
- 13. **Type of Work** Self explanatory. Check appropriate box.
- 14. **Dimensions** Diameter of well and total depth drilled. Depth of completed well may be different from total depth drilled.
- 15. **Construction Details** Self explanatory. Fill in all appropriate blanks.
- 16. **Perforations** Read each statement and answer appropriately. *NOTE: This may not be a required field.*
- 17. **Screens** Read each statement and answer appropriately. *NOTE: This may not be a required field.*
- 18. **Gravel/Filter Packed** Read each statement and answer appropriately.
- 19. Surface Seal Read each statement and answer accurately.
- 20. **Pump** Self explanatory. *NOTE:* This may not be a required field.
- 21. **Water Levels** Land surface elevation should be measured from where the casing meets the ground. Fill in all other blanks appropriately.

- 22. **Well Tests** Every well shall be test pumped to show yield and drawdown prior to the well being placed into service. The test shall be consistent with the requirements of WAC 173-160-321. For permitted wells, information regarding the yield in gallons per minute, feet of drawdown, duration in hours, recovery data, and date is required. For exempt wells, provide the test date, and complete the information under one of the following categories: "Bailer test"; "Airtest"; or if a pump is used, complete the information regarding the yield in gallons per minute, feet of drawdown, duration in hours, and recovery data. Wells under flowing artesian condition must have the flow information and date sections completed. Provide temperature information and indicate if a chemical analysis was made.
- 23. **Construction or Decommission Procedure** Detailed information on the construction of the well including depth and type of soil formation. Please be as specific as possible.
- 24. Start Date Starting date the well was construction or decommissioned.
- 25. Completed Date The date the construction or decommissioning of well was completed.
- 26. Name Self explanatory. Check appropriate box. Please print.
- 27. **Driller/Engineer/Trainee Signature** Self explanatory.
- 28. **Driller or Trainee License No.** Self explanatory.
- 29. If trainee, Licensed Drillers' Signature Self explanatory.
- 30. **License No.** Self explanatory.
- 31. **Drilling Company** Self explanatory. Please print.
- 32. Address Mailing address of company.
- 33. City, State, Zip Mailing address of company.
- 34. **Contractor's Registration No.** Number issued by the WA State Dept of Labor and Industries. This is not a Department of Ecology issued number.
- 35. **Date** Date this form was signed.

copy – owner, 3rd copy – driller

☐ Municipal ✓ Other Monitoring

(cap, valve, etc.)

Water Level

☐ Driven☐ Jetted

	WATER WELL DEPOR
	WATER WELL REPORT Original & 1st copy – Ecology, 2nd copy – owner, 3rd copy
DEPARTMENT OF	
State of Washington	Construction/Decommission ("x" in circ
☐ Constru	uction mission <i>ORIGINAL INSTALLATION</i>
☑ Decom	Notice of Intent Number <u>RE6410</u>
PROPOSED U	
	ter Irrigation Test Well Other Monit
	RK: Owner's number of well (if more than one)
☐ New well ☐ Deepened	☐ Reconditioned Method:☐ Dug☐ Bored☐ Cable☐ Rotary
DIMENSIONS	: Diameter of well 2 inches, drilled 40 ft.
CONSTRUCT	Depth of completed wellft.
Casing Installed:	Welded " Diam. from ft. to Liner installed " Diam. from ft. to
	Threaded " Diam. From ft. to
Perforations:	☐ Yes ☒ No
Type of perforat	or used
SIZE of perfs _	in. by in. and no. of perfsfromft. to _
Screens: Y	
Manufacturer's	Name
Type	Model No.
Diam. Slot size	_ from ft. to ft.
Diam. S	lot size from ft. to ft.
	acked: Yes No Size of gravel/sand from _ft. to ft.
Surface Seal: [Yes No To what depth? _ft.
Material used in	seal
Did any strata co	ontain unusable water?
Type of water?	Depth of strata
Method of sealir	ng strata off
PUMP: Manufa	acturer's Name
	H.P
	LS: Land-surface elevation above mean sea level ft.
	elow top of well Date
	- Dute
Artesian pressur	e lbs. per square inch Date

WELL TESTS: Drawdown is amount water level is lowered below static level

Bailer test _____ gal./min. with _____ft. drawdown after _____hrs.

gal./min. with stem set at _____ft. for ____hrs.

_ft. drawdown after _

_ft. drawdown after _ _gal./min. with _____ft. drawdown after hrs. Recovery data (time taken as zero when pump turned off) (water level measured from

Water Level

Was a chemical analysis made? ☐ Yes ☐ No

Time

☐ No If yes, by whom?

Was a pump test made?
Yes

Water Level

Artesian flow _____g.p.m. Date ___

Temperature of water ____

well top to water level)

Yield:

Time

Date of test .

_gal./min. with _

_gal./min. with ____

nn	EN	т

Notice of Intent No. AE67265				
Unique Ecology Well ID Tag No. AHT759				
Water Right Permit No				
Property Owner Name Dewey Elliott	Property Owner Name Dewey Elliott			
Well Street Address 770 Littlerock Rd				
City Tumwater County Thurston				
Location <u>SW</u> 1/4-1/4 <u>NE</u> 1/4 Sec <u>9</u> Twn <u>17N</u> R (s, t, r Still REQUIRED)				
Lat/Long Lat Deg Lat Min/S	ec			
Long Deg Long Min. Tax Parcel No. (Required) Road ROW	/Sec	<u> </u>		
CONSTRUCTION OR DECOMMISSION of Formation: Describe by color, character, size of material and nature of the material in each stratum penetrated, with at leas of information. (USE ADDITIONAL SHEETS IF NECESS.)	structure, ar t one entry f	nd the kind and		
MATERIAL Pulled 2 inch PVC	FROM 0	TO #		
Filled with bentonite chips	0	40 ft		
From bottom to top				
Start Date 06/22/2021 Completed Da	te <u>06/22</u>	./2021		
ibility for construction of this well, and its compliance w to my best knowledge and belief.	rith all Was	shington well		

WELL CONSTRUCTION CERTIFICATION: I constructed and/or accept respons construction standards. Materials used and the information reported above are true

☑ Driller ☐ Engineer ☐ Trainee Name (Print) Randy Harris			
Driller/Engineer/Trainee Signature	Drilling Company Harris Water Well	Drilling LLC	
Driller or trainee License No. 1374	Address 3980 E North Island Dr	Drining LLC	
IF TRAINEE: Driller's License No:	City, State, Zip Shelton	, WA , 98584	
Randy Harry	Contractor's	, 1111, 70001	
Driller's Signature:	Registration No. Harriww873J9	Date 06/22/2021	
ECV 050 1 20 (P. 00/10) 16			

MW-3

WATER WELL REPORT Original & 1st copy - Ecology, 2nd copy - owner, 3rd copy - driller **ECOLOGY Construction/Decommission** ("x" in circle) Construction Decommission ORIGINAL INSTALLATION Notice of Intent Number RE64105 PROPOSED USE: Domestic ☐ Industrial ☐ Municipal □ DeWater Irrigation ☐ Test Well TYPE OF WORK: Owner's number of well (if more than one) □ New well ☐ Reconditioned Method : ☐ Dug ☐ Bored □ Driven □ Deepened ☐ Cable ☐ Rotary **DIMENSIONS:** Diameter of well 2 inches, drilled 28 ft. Depth of completed well _ CONSTRUCTION DETAILS Casing ☐ Welded " Diam. from _ " Diam. from _____ ft. to ___ Installed: Liner installed _ " Diam. From _ ☐ Threaded Perforations: Yes No Type of perforator used _ SIZE of perfs _____in. by ____ in. and no. of perfs ____ Screens: Yes No K-Pac Location _ Manufacturer's Name Type Model No. Diam. Slot size from ___ ft. to __ ft. Slot size from Diam. ft. to Gravel/Filter packed: ☐ Yes ☐ No Size of gravel/sand Materials placed from _ ft. to _ ft. Surface Seal: Yes No To what depth? _ft. Material used in seal ____ Did any strata contain unusable water? ☐ Yes Type of water? _____ Depth of strata Method of sealing strata off PUMP: Manufacturer's Name _ H.P. Type: _ WATER LEVELS: Land-surface elevation above mean sea level _____ ft. Static level ft. below top of well Date _ Artesian pressure _____ lbs. per square inch Date ____ Artesian water is controlled by _ WELL TESTS: Drawdown is amount water level is lowered below static level Was a pump test made? Yes No If yes, by whom? _gal./min. with ____ft. drawdown after ___ gal./min. with ____ft. drawdown after ____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 Date of test Bailer test _____ gal./min. with _____ft. drawdown after ____ hrs. ___gal./min. with stem set at ____ft. for ____hrs. Airtest

Artesian flow _____g.p.m. Date

CURRENT

Notice of Intent No. AE67265		
Jnique Ecology Well ID Tag No. AHT761		
Water Right Permit No.		
Property Owner Name <u>Dewey Elliott</u>		
Well Street Address 770 Littlerock Rd		
City <u>Tumwater</u> County <u>Thurston</u>		
ocation <u>SW</u> 1/4-1/4 <u>NE</u> 1/4 Sec <u>9</u> Twn <u>17N</u> (s, t, r Still REQUIRED)	R <u>02E</u>	EWM ⊠ Or WWM □
Lat/Long Lat Deg Lat Min	n/Sec	_
Long Deg Long N	/Iin/Sec	
Γax Parcel No. (Required) Road ROW		_
CONSTRUCTION OR DECOMMISSION Formation: Describe by color, character, size of material nature of the material in each stratum penetrated, with at of information. (USE ADDITIONAL SHEETS IF NEC	and structure, a least one entry	nd the kind and for each change
MATERIAL Pulled 2 inch PVC	FROM 0	TO
Filled with bentonite chips	- 0	2011
From bottom to top		
·		
		_
Start Date <u>06/22/2021</u> Completed	Date <u>06/2</u>	2/2021

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 | Finginger | Trainer | Name (Prior) Randy Harris

Binner Lighteer Trainee Traine (Till) Randy Trains		
Driller/Engineer/Trainee Signature	Drilling Company Harris Water Well Drilling LLC	
Driller or trainee License No. 1374	Address 3980 E North Island Dr	
IF TRAINEE: Driller's License No:	City, State, Zip Shelton , WA , 98584	
Randy Harris	Contractor's	
Driller's Signature:	Registration No. Harriww873J9 Date 06/22/2021	
TOWARD LANGE CONTRACTOR OF THE		

MW-1A

WATER WELL REPORT Original & 1st copy - Ecology, 2nd copy - owner, 3rd copy - driller **ECOLOGY Construction/Decommission** ("x" in circle) Construction Decommission ORIGINAL INSTALLATION Notice of Intent Number RE64105 PROPOSED USE: Domestic ☐ Industrial Municipal ☐ DeWater ☐ Irrigation ☐ Test Well ☑ Other Monitoring TYPE OF WORK: Owner's number of well (if more than one) ☐ Reconditioned Method : ☐ Dug ☐ Bored ☐ Cable ☐ Rotary ☐ New well ☐ Driven ☐ Jetted □ Deepened **DIMENSIONS:** Diameter of well 2 inches, drilled 24 ft. Depth of completed well _ CONSTRUCTION DETAILS Casing □ Welded " Diam. from " Diam. from _ Installed: Liner installed ft. to " Diam. From _ Perforations: Yes No Type of perforator used ___in. by ____ in. and no. of perfs Screens: Yes No K-Pac Manufacturer's Name Type Model No. Diam. Slot size from ft. to ____ ft. Diam. Slot size from ft. to Gravel/Filter packed: ☐ Yes ☐ No Size of gravel/sand Materials placed from _ ft. to _____ ft. Surface Seal: Yes No To what depth? _ft. Material used in seal _ Did any strata contain unusable water? ☐ Yes ☐ No _ Depth of strata _ Type of water? Method of sealing strata off PUMP: Manufacturer's Name __ Type: WATER LEVELS: Land-surface elevation above mean sea level ft. Static level _ft. below top of well Date _ Artesian pressure _____ lbs. per square inch Date ___ Artesian water is controlled by (cap, valve, etc.) WELL TESTS: Drawdown is amount water level is lowered below static level Was a pump test made? Yes No If yes, by whom? gal./min. with ____ft. drawdown after ____hrs. gal./min. with ____ft. drawdown after ____hrs. gal./min. with ____ft. drawdown after ____hrs. Yield: 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

Artesian flow _____g.p.m. Date ___ Temperature of water _____ Was a

Bailer test _____ gal./min. with ____ft. drawdown after ____hrs.

Airtest _____ gal./min. with stem set at _____ft. for ____hrs.

CURRENT

Notice of Intent No. AE67265		
Jnique Ecology Well ID Tag No. AHT765		
Vater Right Permit No.		
roperty Owner Name Dewey Elliott		
Vell Street Address 770 Littlerock Rd		
City Tumwater County Thurston		
ocation <u>SW</u> 1/4-1/4 <u>NE</u> 1/4 Sec <u>9</u> Twn <u>17N</u> F s, t, r Still REQUIRED)	R <u>02E</u>	EWM ⊠ Or WWM □
Lat Min/ Long Deg Lat Min/ Long Deg Long Mi Fax Parcel No. (Required) Road ROW	n/Sec	
CONSTRUCTION OR DECOMMISSION Formation: Describe by color, character, size of material at nature of the material in each stratum penetrated, with at le of information. (USE ADDITIONAL SHEETS IF NECES	nd structure, a east one entry SSARY.)	and the kind and for each change
MATERIAL Pulled 2 inch PVC	FROM 0	TO 24 ft
Filled with bentonite chips	+ -	2111
From bottom to top		
	_	
	-	
	_	
***************************************	+	
	-	
	+	
Start Date <u>06/22/2021</u> Completed D	Data 06/2	2/2021

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 Tengineer Trainee Name (Print) Randy Harris

Britier Engineer Trainee Traine (Time) Rainey Trains			
Driller/Engineer/Trainee Signature	Drilling Company Harris Water Well Dr	illing LLC	
Driller or trainee License No. 1374	Address 3980 E North Island Dr	mig BBe	
IF TRAINEE: Driller's License No:	City, State, Zip Shelton	. WA . 98584	
Randy Harry	Contractor's		
Driller's Signature:	Registration No. <u>Harriww873J9</u>	Date <u>06/22/2021</u>	
ECV 050 1 20 (Per 02/10) If		(0. 107. (073	

IN THE PROPERTY OF THE PROPERT
WATER WELL REPORT Original & 1st copy - Ecology, 2nd copy - owner, 3rd copy - driller
DEPARTMENT OF
ECOLOGY State of Washington Construction/Decommission ("x" in circle)
Construction
Decommission ORIGINAL INSTALLATION
Notice of Intent Number R064105
PROPOSED USE: Domestic Industrial Municipal
☐ DeWater ☐ Irrigation ☐ Test Well ☐ Other Monitoring
TYPE OF WORK: Owner's number of well (if more than one)
☐ New well ☐ Reconditioned Method: ☐ Dug ☐ Bored ☐ Driven
☐ Deepened ☐ Cable ☐ Rotary ☒ Jetted
DIMENSIONS: Diameter of well 2 inches, drilled 28 ft.
Depth of completed wellft.
CONSTRUCTION DETAILS
Casing Welded " Diam. fromft. toft. Installed: Liner installed" Diam. fromft. toft.
Installed:
Perforations: Yes No
Type of perforator used
SIZE of perfs in. by in. and no. of perfs from ft. to ft. Screens: Yes No K-Pac Location
Manufacturer's Name
Type Model No
DiamSlot size _ from ft. to ft. Diam Slot size from ft. to ft.
Gravel/Filter packed: ☐ Yes ☐ No Size of gravel/sand Materials placed from _ ft. to ft.
Surface Seal: Yes No To what depth? _ft.
Material used in seal
Did any strata contain unusable water?
Type of water? Depth of strata
Method of sealing strata off
PUMP: Manufacturer's Name
Type: H.P
WATER LEVELS: Land-surface elevation above mean sea level ft.
Static level _ft. below top of well the
Artesian pressure lbs. per square inch Date
Artesian water is controlled by (cap, valve, etc.)
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. withft. drawdown afterhrs.
Yield:gal./min. withft. drawdown afterhrs.
Yield:gal./min. withft. drawdown afterhrs.
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.

Airtest _____gal./min. with stem set at _____ft. for ____hrs.

Artesian flow _____g.p.m. Date _____

CURRENT

Notice of Intent No. AE69079		
Unique Ecology Well ID Tag No. AHT762		
Water Right Permit No		
Property Owner Name <u>Dewey Elliott</u>		
Well Street Address 770 Littlerock Rd SW		
City <u>Tumwater</u> County <u>Thurston</u>		
Location <u>NE</u> 1/4-1/4 <u>SW</u> 1/4 Sec <u>9</u> Twn <u>17N</u> 1 (s, t, r Still REQUIRED)	R <u>2E</u>	EWM ⊠ Or WWM □
Lat/Long Lat Deg 46.98522 Lat M Long Deg -122.93286 Lon Tax Parcel No. (Required) 09090009000	g Min/Se	
CONSTRUCTION OR DECOMMISSION Formation: Describe by color, character, size of material a nature of the material in each stratum penetrated, with at least information. (USE ADDITIONAL SHEETS IF NECESTAL	nd structure, east one entry	and the kind and
MATERIAL	FROM	
Filled 2 inch casing with bentonite chips	0	28 ft
From bottom to top (land surface)		
	_	
	_	_
	+	
Start Date <u>04/04/2023</u> Completed I	Date <u>04/0</u>	04/2023
bility for construction of this well, and its compliance o my best knowledge and belief.	with all W	ashington well

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 Engineer Trainee Name (Print) Randy Harris

Britie Engineer Trainee Name (Pini) Randy Flarits			
Driller/Engineer/Trainee Signature	Drilling Company Harris Water Well Dr	rilling LLC	
Driller or trainee License No. 1374	Address 3980 E North Island Dr	Titilig EEC	
IF TRAINEE: Driller's License No:	City, State, Zip Shelton	. WA . 98584	
Randy Harry	Contractor's	, 1111, 50001	
Driller's Signature:	Registration No. Harriww873J9	Date <u>04/04/2023</u>	
FCY 050-1-20 (Rev 02/10) If you need this document in an alternate format, play	pase call the Water Pesourees Program at 3	60 407 6972	

WATER WELL REPORT Original & 1st copy - Ecology, 2nd copy - owner, 3rd copy - driller ECOLOGY **Construction/Decommission** ("x" in circle) Construction Decommission ORIGINAL INSTALLATION Notice of Intent Number R064105 PROPOSED USE: Domestic ☐ Industrial ■ Municipal ☐ DeWater ☐ Irrigation ☐ Test Well TYPE OF WORK: Owner's number of well (if more than one) ☐ Reconditioned Method : ☐ Dug ☐ Bored ☐ Rotary ☐ New well ☐ Driven □ Deepened ☐ Cable **DIMENSIONS:** Diameter of well 2 inches, drilled 28 ft. Depth of completed well _ CONSTRUCTION DETAILS Casing ☐ Welded " Diam. from ft. to ___" Diam. from _ ☐ Liner installed _ Installed: ft. to " Diam. From ☐ Threaded ft. to Perforations: Yes No Type of perforator used SIZE of perfs _____in. by _____ in. and no. of perfs Screens: Yes No K-Pac Manufacturer's Name Model No. Diam. Slot size from _ __ ft. Slot size Diam. from ft. to Gravel/Filter packed: ☐ Yes ☐ No Size of gravel/sand Materials placed from _ ft. to _ Surface Seal: Yes No To what depth? ft. Material used in seal Did any strata contain unusable water? ☐ Yes ☐ No Type of water? Depth of strata Method of sealing strata off PUMP: Manufacturer's Name __ H.P. WATER LEVELS: Land-surface elevation above mean sea level _____ ft. Static level _ft. below top of well Date _ Artesian pressure _____ lbs. per square inch Date ___ Artesian water is controlled by (cap, valve, etc.) WELL TESTS: Drawdown is amount water level is lowered below static level Was a pump test made? Yes No If yes, by whom? gal./min. with ____ Yield: _ft. drawdown after _ gal./min. with ____ft. drawdown after _ 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)

Water Level

Bailer test _____ gal./min. with _____ft. drawdown after _____hrs.

___gal./min. with stem set at ____ft. for ____hrs.

Time

Date of test

Water Level

Artesian flow _____g.p.m. Date _

CURRENT

Notice of Intent No. AE69079		
Unique Ecology Well ID Tag No. AHT763		
Water Right Permit No.		
Property Owner Name Dewey Elliott		
Well Street Address 770 Littlerock Rd SW		
City <u>Tumwater</u> County <u>Thurston</u>		
Location <u>NE</u> 1/4-1/4 <u>SW</u> 1/4 Sec <u>9</u> Twn <u>17N</u> R (s, t, r Still REQUIRED)	<u>2E</u>	EWM ⊠ Or WWM □
Lat/Long Lat Deg 46.98522 Lat Mir Long Deg -122.93286 Long Tax Parcel No. (Required) 09090009000	Min/Sed	 -
CONSTRUCTION OR DECOMMISSION Formation: Describe by color, character, size of material and nature of the material in each stratum penetrated, with at leas of information. (USE ADDITIONAL SHEETS IF NECESS	structure, a	nd the kind and for each change
MATERIAL	FROM 0	28 ft
Filled 2 inch casing with bentonite chips	0	2011
From bottom to top (land surface)		
		_
		_
Start Date <u>04/04/2023</u> Completed Da	ite <u>04/0</u> 4	4/2023
ibility for construction of this well, and its compliance w to my best knowledge and belief.	rith all Wa	shington well

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 | Engineer | Trainee | Name (Print) Randy Harris

Britie Bigineer Trainee Traine (Film) Railey Harris		
Driller/Engineer/Trainee Signature	Drilling Company Harris Water Well Drilling LLC	
Driller or trainee License No. 1374	Address 3980 E North Island Dr	
IF TRAINEE: Driller's License No:	City, State, Zip Shelton , WA , 98584	
Randy Harry	Contractor's	
Driller's Signature:	Registration No. Harriww873J9 Date 04/04/2023	
ECV 050 1 20 (P 02/10) IC 1.1: 1	U.J. W B	