FILE: ORIG. & FIRST COPY - DEPT. OF ECOLOGY SECOND COPY - OWNER; THIRD COPY - DRILLER

## WATER WELL REPORT STATE OF WASHINGTON

START CARD NO. WE32285 UNIQUE WELL ID BLH859 WATER RIGHT PERMIT NO N/A

(1) OWNER NAME: UPPER LEFT PROPERTIES

(2) LOCATION OF WELL: County

PIERCE

ADDRESS:

20410 41ST PL W., LYNNWOOD, WA 98036

NW 1/4 NW 1/4 SEC 11 TWP 16N R 3E

(2a) STREET ADDRESS OF WELL (or nearest address): 2324 403RD ST E. PARCEL: 0316112013

0.27	PROPOSED USE: TYPE OF WORK: METHOD:	DOMESTIC NEW WELL ROTARY					1	.(10) WELL LOG OR DECOMMISSIONING PROCEDURE DE	ESCRIPTIC	)N	
							i	MATERIAL	FRO	м i	ТО
							1	LT BROWN BOULDERS, COBBLES, GRAVEL, SAND,	0		4
(5)	DIMENSIONS: Diameter of Drilled 384 feet.	of well Depth of com		6 ell	382.5	inche:	es. ft.	SILT BLUE GRAY BOULDERS, COBBLES, GRAVEL, SAND,	4		12
							_	CLAY DK GRAY BOULDERS, COBBLES, GRAVEL, SAND,	l   12		21
							-	CLAY			
(6)	CONSTRUCTION DETAILS	LS Diam. From Diam. From Diam. From					. i-	GRAY SANDY CLAY	21	i-	29 45
	Casing instld: 6 " Welded ☑ "			ft. to ft. to ft. to		s ft ft	_	GRAY BOULDERS, COBBLES, GRAVEL, SAND, CLAY BROWN GRAVEL, CLAY, SOME SAND	45	<u> </u> -	48
	Liner    "						t. I	GREENISH GRAY GRAVEL, SANDY CLAY	48		50
	Threaded						"  -	BROWN GRAVEL, CLAY, SOME SAND	50	- i	59
							_i_	BLUE GRAY GRAVEL, CLAY, SOME SAND	59	ı	72
		_	n. by				Ţ	GRAY SANDY CLAY	72	!	87
	Perforations: Yes	No 🗹		ft. to ft. to ft. to			-	BLUE GRAY CLAY	87		172
	Type of perforator used	om					i-	GRAY CLAY WITH FINE SAND	172		177
	Size of perforations						n. j_	BLUE GRAY STICKY CLAY	j 177		243
	perforations from						n.	GRAY CLAY WITH SAND GRAY CLAY	243		246 293
	perforations from						n. <b> </b> n. <b> </b>	GRAY CLAY WITH THIN SAND LENSES	1 293		310
	perforations from					10	"i	BLUE GRAY CLAY	i 310		331
							<b>−i</b>	GRAY CLAY	331		346
	Screens: Yes 🗵 No						ŀ	LT GREENISH GRAY CLAY	346		365
		INSON					i	GRAY CLAY WITH SAND LAYERS	365		377
	Туре	Model No.					i	GRAY RED BLACK SAND, SILT, WATER	377		383
	Diam 5 Slot size	e 15	from		to 382.5		t.	BLUE GRAY CLAY	383	!_	384
	Diam Slot size	9	from	ft.	. to	ft	t.				
	Gravel packed Yes	No 🗹	o ☑ Size of gra				į		ļ	_ -	111111111111111111111111111111111111111
	Gravel packed from		ft. to			ft	t.				
	Surface seal: Yes	No 🗆	To what	depth?	18	ft	i t. I			-  -	
	Material used in seal	CHIPS				<u> </u>					
	Did any strata contain unusab	Yes	s 🗌 N	o 🗹							
	Type of water? Depth of Strata			ft.	t. i		<u> </u>	<u> </u> _			
	Method of sealling strata off						ŀ		l		
(7)	PUMP: Manufacturer's Name						7		-		
(1)	Туре		H. P.								
							1				
(8)	WATER LEVELS: Surface ele						t.		ļ		
	Static level 83	below top of v		Date	08/14/	18	i			i-	
	Artesian pressure Artesian pressure is controlled	lbs. Per sq. in	i.	Date			i		i	i	
	Artesian pressure is controlled	д Бу					!-				
(0)	WELL TESTS: Pump test	mada?		By Who	m		Ţ	Work Started 08/08/18 Completed: 08.	/14/18		
(9)	WELL TESTS: Pump test Yield gal./min with	made :	ft. drawdov		1111	hrs	s.	Work Started 65/00/10 Completed.	1 11 10		
	Yield gal./min with	in with ft. draw		wn after		hrs		WELL CONSTRUCTOR CERTIFICATION:			
	Yield gal./min with			wn after		hrs	s.	I constructed and/or accept responsibility for constru	action of		
	Recovery data:				Lvl.		i	this well, and its compliance with all Washington well		ction	
Time	Wtr Lvl. Time	Wtr Lvl.	Time	Wtr			i	standards. Materials used and the information repo	rted		
							İ	above are true to my best knowledge and belief.			
								ame: RICHARDSON WELL DRILLING COMPANY INC.			
	Date of test:			51 AUX-000-0				ddress: P. O. BOX 41427 TACOMA, WA 98444			
	test gal./min with t 20 gal/min ste	m set at	ft. drawdov		r	hrs 1 hrs		Signed)	Lic No.	2432	
Airtes Artesi	on flow gal/min	Date	301	16. 10	•	1 11/5		(Well Driller)			
	erature of water	Was chemica	l analysis	made?	NO		C	ontractor's Registration No. RICHAW*3210B	DATE	8/27/1	8
p			, -10					announcements and the Color of the Anticopy o			

## WATER MANAGEMENT LABS 1515 80TH STREET E TACOMA, WA 98404 (253) 531-3121 WATER BACTERIOLOGICAL ANALYSIS

If instructions are not followed	, sample will be rejected.								
DATE COLLECTED TIME CO	LLECTED COUNTY NAME								
MONTH DAY YEAR 3	To Acc.								
TYPE OF SYSTEM   IF PUBLIC SYSTEM									
T PUBLIC	CIRCLE GROUP								
MADIVIDUAL I.D. No.	→ A B								
(serves only 1 residence)  NAME OF SYSTEM									
.00									
UPPET LEFT PROSPECIFIC LOCATION WHERE SAMPLE COLLECTED	TELEPHONE NO.								
(ie, kitchen tap @ school, fire station, fountain)	DAY (23) 537-7332								
at well	EVENING ( )								
SAMPLE COLLECTED BY: (Name)	SYSTEM OWNER/MGR.: (Name)								
Auson L									
SOURCE TYPE GROUND WATER UNDER									
SURFACE WELL or SPRING PURCHASED OF COMBINATION INTERTIE OF OTHER									
SEND REPORT TO: (Print Full Name, Address and Zip Code) REChard Sch Well Drilling									
PO BOX 44427 7	acora 98948								
1.00.000	WASHINGTON								
TYPE OF SAMPLE (check only one in this co	lumn)								
DOUTINE DOUTING	ated (Danishus) Tatal Franch								
DRINKING WATER	ated (Residual:Total Free)								
Check treatment /	ted or Other								
REPEAT SAMPLE FOR: Lab #_ Date_									
RAW SOURCE WATER Source	# S Total Coliform Fecal Coliform E.coli								
GROUNDWATER RULE (GWR) Source									
New Const/Eng/Other									
REMARKS									
LABORATORY RESULTS	S (FOR LAB USE ONLY)								
	ODE: 9221 D								
Enumerati	on Results								
TOTAL COLIFORM/100 ml	E. COLI/100 ml								
FECAL COLIFORM/100 ml	HETEROTROPHIC/per ml								
SAMPLE NOT TESTED BECAUSE:	_								
☐ Sample too old	☐ TNTC/ Turbid								
☐ Wrong container	☐ Other								
DRINKING WATER									
UNSATISFACTORY, Coliforms present a	and SATISFACTORY, Coliforms absent								
☐ E.coli present	☐ E.coli absent								
L									
LAB NO. DATE, T	IME RECEIVED BY								
089 05965 875	518 11:00 Of								
DATE REPORTED	ROUTE ACCT. #								
8-27-18/11)									



1515 80th St. E. Tacoma, WA 98404 (253) 531-3121

41.2

## **INORGANIC CHEMICALS (IOCS) REPORT**

System	ID No: NA	System	Name:	Inper	left	Proper	ties			
Lab/Sa	mple No: 08901	907	_	ollected:	08.24	18		I Source N	No: MA	+
Multip	le Source Nos: NA			San	nple Type:	B	Sam	ple Purpo	se: C	
Date Re	eceived: 08,75	∑ Da	te Reported	d: 09-	01-18	St	pervisor:	ans		
County	Pierce	Da	te Digested			Group:	A B	Oth	er)PV7	_
	Location: 727	4 403	rd St	F	- Wel	Λ				
	esults & Bill To: P	0000	10 10 11	D	11:22	Remarks:				
	P	A BAX	4447	7	in S					
	Tarr	ma, l	IAG	8449	Z					
DOH#	ANALYTES	RESULTS	UNITS	SRL	TRIGGER	MCL	EXC	EEDS	Method/A	nalvst
		GULATED	**************************************			Trigger? MCL?				
4	Arsenic	0.0048	mg/L	0.001	0.01	0.01	NO	NO	200.8	TRC
5	Barium	<0.1	mg/L	0.1	2	2	1		200.8	JRG.
6	Cadmium	<0.001	mg/L	0.001	0.005	0.005			200.8	JRC
7	Chromium	<0.007	mg/L	0.007	0.1	0.1			200.8	TRE
11	Mercury	50.0002	mg/L	0.0002	0.002	0.002			200.8	JRC
12	Selenium	<0.002	mg/L	0.002	0.05	0.05			200.8	SPC
110	Beryllium	50.0003	mg/L	0.0003	0.004	0.004			200.8	JPC
112	Antimony	<0.003	mg/L	0.003	0.006	0.006			200.8	JPC
113	Thallium	10.001	mg/L	0.001	0.002	0.002			200.8	JPL
116	Cyanide	<0.01	mg/L	0.01	0.2	0.2			4500-CNF	SPC
19	Fluoride	<0.20	mg/L	0.2	2	4			300.0	CL
114	Nitrite - N	<0.10	mg/L	0.1	0.5	1			300.0	CL
20	Nitrate - N	<0.30	mg/L	0.2	5	10			300.0	LL
161	Total Nitrate/Nitrite	20.40	mg/L	0.5	5	10	1/	1	300.0	CL
	TOTAL TALLACOJA TALLACO	EPA REGULA				1 20				
8	Iron	NA	mg/L	0.1	7.10 <b>-2</b> (1.10)	0.3			3111B	
10	Manganese	107.	mg/L	0.01		0.05			200.8	
13	Silver		mg/L	0.1		0.1			200.8	
21	Chloride		mg/L	20		250			300.0	
22	Sulfate		mg/L	50		250			300.0	
24	Zinc		mg/L	0.2		5			200.8	
			GULATED	0.12						
14	Sodium	17.1	mg/L	5					200.8	SPC
15	Hardness	NA	mg/L	10					2340C	7,0
16	Conductivity	.1	umhos/cm	0.00		700			2510B	
17	Turbidity	2.88	NTU	0.1					2130B	CL
18	Color	AN	color units	15		15			2120B	
26	Total Dissolved Solids	T.	mg/L	100		500		~ .	2540C	
111 Nickel		< 0.005	mg/L	0.005					200.8	TRC
			REGULATED							,
9	Lead	<0.001	mg/L	0.001		7			200.8	SRC
23	Copper	<0.02	mg/L	0.02				l l	200.8	JRC JRC
OMMI	ENTS: PC 19									-l7