

STATE OF OREGON  
 WATER SUPPLY WELL REPORT  
 (as required by ORS 537.765 & OAR 690-205-0210)

WELL LABEL # L 85065

START CARD # 190222

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(1) LAND OWNER Owner Well I.D. \_\_\_\_\_

First Name MIKE Last Name THOMPSON  
 Company \_\_\_\_\_  
 Address 8095 DELPHINIUM RD NE  
 City SALEM State OR Zip 97305

(2) TYPE OF WORK  New Well  Deepening  Conversion  
 Alteration (repair/recondition)  Abandonment

(3) DRILL METHOD  
 Rotary Air  Rotary Mud  Cable  Auger  Cable Mud  
 Reverse Rotary  Other

(4) PROPOSED USE  Domestic  Irrigation  Community  
 Industrial/ Commercial  Livestock  Dewatering  
 Thermal  Injection  Other

(5) BORE HOLE CONSTRUCTION Special Standard  (Attach copy)  
 Depth of Completed Well 242 ft.

BORE HOLE			SEAL				sacks/
Dia	From	To	Material	From	To	Amt	lbs
14	0	44	Cement	0	44	30	S
11.75	44	160	Cement	137	159.5	16	S
10	160	242					

How was seal placed: Method  A  B  C  D  E  
 Other \_\_\_\_\_  
 Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
 Filter pack from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_ Size \_\_\_\_\_  
 Explosives used:  Yes Type \_\_\_\_\_ Amount \_\_\_\_\_

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	10		1.5	159.5	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Shoe  Inside  Outside  Other Location of shoe(s) 159.5  
 Temp casing  Yes Dia \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

(7) PERFORATIONS/SCREENS

Perforations Method \_\_\_\_\_  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

Perf/ Screen	Casing/ Liner	Screen Dia	From	To	Scr/slot width	Slot length	# of slots	Tele/ pipe size

(8) WELL TESTS: Minimum testing time is 1 hour

Pump  Bailer  Air  Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
800		240	

Temperature 54 °F Lab analysis  Yes By \_\_\_\_\_  
 Water quality concerns?  Yes (describe below)

From	To	Description	Amount	Units

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(9) LOCATION OF WELL (legal description)

County MARION Twp 7 S N/S Range 2 W E/W WM  
 Sec 23 NW 1/4 of the NW 1/4 Tax Lot 100  
 Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_  
 Lat \_\_\_\_\_ ° 0 ' " or \_\_\_\_\_ DMS or DD  
 Long \_\_\_\_\_ ° 0 ' " or \_\_\_\_\_ DMS or DD  
 Street address of well  Nearest address

8095 DELPHINIUM RD NE SALEM 97305

(10) STATIC WATER LEVEL

Existing Well / Predeepening	Date	SWL(psi)	+ SWL(ft)
Completed Well	02-02-2007		55

Flowing Artesian?  Dry Hole?

WATER BEARING ZONES Depth water was first found 9

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
01-29-2007	9	22	5		4
01-29-2007	63	97	150		54
02-09-2007	160	242	800		55

(11) WELL LOG

Material	From	To
Top soil	0	4
Silty brown and gray clay	4	22
Gray clay	22	44
Very sandy gray clay	44	46
Large brown sand and gravel	46	53
Fight brown sand and gravel some loose seams	53	90
Gray sand and gravel	90	97
Red cinders	97	110
Red and gray clay	110	127
Firm brown basalt	127	137
Greenish light gray basalt	137	160
Brown basalt with broken seams	160	185
Semi-weathered gray and brown basalt	185	224
Large broken basalt porous	224	242

Date Started 01-29-2007 Completed 02-09-2007

(unbonded) Water Well Constructor Certification

I certify that the work I performed on the construction, deepening, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.

License Number 1629 Date 02-13-2007  
 Password: (if filing electronically) \_\_\_\_\_  
 Signed \_\_\_\_\_

(bonded) Water Well Constructor Certification

I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.

License Number 1273 Date 02-13-2007  
 Password: (if filing electronically) \*\*\*\*  
 Signed *Flow Supp*  
 Contact Info (optional) \_\_\_\_\_

MARI 57221  
**Westerberg Drilling, Inc.**  
 36728 S. Kropf Rd.  
 Molalla, OR 97038

AMENDED 5-30-03  
 WELL I.D. # L 62455  
 START CARD # 154514

STATE OF OREGON  
 WATER SUPPLY WELL REPORT  
 (as required by ORS 537.765)

Instructions for completing this report are on the last page of this form.

(1) LAND OWNER: Westerberg Drilling, Inc. Well Number \_\_\_\_\_  
 Name GLEN DEVRIES / ELIZABETH DEVRIES  
 Address 8414 DELPHINIUM PLACE NE  
 City SALEM State OR Zip 97305

(2) TYPE OF WORK  
 New Well  Deepening  Alteration (repair/recondition)  Abandonment

(3) DRILL METHOD:  
 Rotary Air  Rotary Mud  Cable  Auger  
 Other \_\_\_\_\_

(4) PROPOSED USE:  
 Domestic  Community  Industrial  Irrigation  
 Thermal  Injection  Livestock  Other \_\_\_\_\_

(5) BORE HOLE CONSTRUCTION:  
 Special Construction approval  Yes  No Depth of Completed Well 404 ft.  
 Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
14"	0	126	Cement	0	126	50 sacks
10"	126	350				
7-7/8"	350	404				

How was seal placed: Method  A  B  C  D  E  
 Other \_\_\_\_\_

Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
 Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Size of gravel \_\_\_\_\_

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 10"	+1.5	126	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner: None				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used  Inside  Outside  None  
 Final location of shoe(s) 126'

(7) PERFORATIONS/SCREENS:  
 Perforations Method None  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour  
 Pump  Bailer  Air  Artesian

Yield gal/min	Drawdown	Drill stem at	Flowing Time
approx 400	N/A	404'	1 hr

Temperature of water 55° Depth Artesian Flow Found \_\_\_\_\_  
 Was a water analysis done?  Yes By whom \_\_\_\_\_  
 Did any strata contain water not suitable for intended use?  Too little  
 Salty  Muddy  Odor  Colored  Other \_\_\_\_\_  
 Depth of strata: \_\_\_\_\_

(9) LOCATION OF WELL by legal description:  
 County MARION Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
 Township 7S N or S Range 2W E or W. WM. \_\_\_\_\_  
 Section 23 SE 1/4 SE 1/4  
 Tax Lot 1000 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address): W. SIDE OF HOWELL PRAIRIE RD. JUST N. OF RAILROAD TRACKS

(10) STATIC WATER LEVEL:  
43.5 ft. below land surface. Date 4-18-03  
 Artesian pressure \_\_\_\_\_ lb per square inch Date \_\_\_\_\_

(11) WATER BEARING ZONES:  
 Depth at which water was first found 150'

From	To	Estimated Flow Rate	SWL
150'	200'	200 GPM	43.5
200'	350'	150 GPM	43.5
350'	404'	50 GPM	43.5

(12) WELL LOG:  
 Ground Elevation \_\_\_\_\_

Material	From	To	SWL
soil	0	1	
clay brown	1	10	
clay brown silty	10	25	
clay grey	25	40	
clay brown crumbly	40	45	
cemented gravel brown	45	87	
yellow clay crumbly w/ gravel	87	95	
weathered basalt red	95	99	
weathered basalt green	99	114	
basalt grey hard	114	126	
basalt grey & brown	126	145	
basalt grey, red & brown porous	145	158	
basalt brn & gry fractrd	158	162	
basalt brown & yellow	162	175	
basalt grey & brown	175	181	
basalt grey w/ fractures	181	182	
cont'd on page 2			

Date started 4-9-03 Completed 4-18-03

(unbonded) Water Well Constructor Certification:  
 I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.  
 WWC Number 1358  
 Signed [Signature] Date 5-6-03

(bonded) Water Well Constructor Certification:  
 I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.  
 WWC Number 688  
 Signed [Signature] Date 5-6-03

ORIGINAL - WATER RESOURCES DEPARTMENT FIRST COPY - CONSTRUCTOR SECOND COPY - CUSTOMER

RECEIVED

AUG 31 2010

WATER RESOURCES DEPT 1 11125  
 SALEM, OREGON

WELL #4

RECEIVED JUN 1 2008

