

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 517.765)

YAMH 53951

NOV 22 2004

WELL I.D.# L 7104L

START CARD # 171321

Instructions for completing this report are on the last page of this form. WATER RESOURCES DEPT SALEM, OREGON

(1) LAND OWNER Well Number 2
Name Roger Hildebrandt
Address 16835 SE Wallace Rd
City Dayton State OR Zip 97114

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

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

(4) PROPOSED USE
 Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other _____

(5) BORE HOLE CONSTRUCTION Special Construction: Yes No
Depth of Completed Well 212 ft.
Explosives used: Yes No Type _____ Amount _____

BORE HOLE			SEAL		
Diameter	From	To	Material	From	To
12	0	21	Cement	3	21
			bentonite	0	3
8	21	212			

How was seal placed: Method A B C D E
 Other bentonite placed dry
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: <u>8 in</u>	<u>±1</u>	<u>212</u>	<u>.250</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
Final location of shoe(s) 212

(7) PERFORATIONS/SCREENS
 Perforations Method Holts
 Screens Type _____ Material _____

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
<u>197</u>	<u>202</u>	<u>5/16</u>	<u>200</u>			<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
<u>200</u>		<u>210</u>	<u>2 Hr</u>

Temperature of water 54 ± 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 (legal description)
County Yamhill
Tax Lot 700 Lot _____
Township 5-5 N or S Range 3-W E or W WM
Section 22 SW 1/4 NE 1/4
Lat _____ or _____ (degrees or decimal)
Long _____ or _____ (degrees or decimal)

Street Address of Well (or nearest address) None Bare Land on upper grand Island Rd across from 18695

(10) STATIC WATER LEVEL
3 ft. below land surface. Date 11-16-04
_____ ft. below land surface. Date _____
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES
Depth at which water was first found 164

From	To	Estimated Flow Rate	SWL
<u>164</u>	<u>212</u>	<u>200+</u>	<u>3</u>

(12) WELL LOG

Material	From	To	SWL
Top Soil	0	2	
Brown clay	2	25	
Gravel with sand and brown clay binder dry	25	45	
Black sandy soft clay	45	49	
Blue clay soft	49	51	
Sandy blue clay with trace of gravel	51	53	
Soft very sandy blue-gray clay with fine sand	53	164	
Loose sand medium-dark gray	164	190	
Sand + gravel dark gray loose	190	212	

Date Started 11-4-04 Completed 11-16-04

(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.

WWC Number 1629 Date 11-17-04

Signed [Signature]

(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.

WWC Number 1273 Date 11-17-04

Signed Floyd Suppe

REGISTERED
APR 10 2014