

Orig. Location well 3  
 CLAC  
 52937

1) OWNER: Well No. L15858  
 Name WESLEY JOHNSON  
 Address 14990 SE ORIENT DRIVE  
 City BORING St OR Zip 97009

(9) LOCATION OF WELL by legal description:  
 County CLACK Lat. " " " Long. " " "  
 Township 2 S Range 4 E W. 1/4  
 Section 10 SE 1/4 NW 1/4  
 Tax Lot 100 Lot Block Subdivision  
 Street Address of Well (or nearest Address)  
 14990 SE ORIENT DRIVE BORING, OR 97009

2) TYPE OF WORK: NEW WELL

3) DRILL METHOD: ROTARY AIR

4) PROPOSED USE: IRRIGATION

(10) STATIC WATER LEVEL:  
 0 ft. below land surface. Date \_\_\_\_\_  
 Artesian pressure \_\_\_\_\_ lb per square in. Date \_\_\_\_\_

(5) BORE HOLE CONSTRUCTION:  
 Special Construction Approval NO Depth of Compl. Well 18 ft  
 Explosives used NO Type \_\_\_\_\_ Amount \_\_\_\_\_

(11) WATER BEARING ZONES:  
 Depth at which water was first found 0  

From	To	Est Flow Rate	SWL
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

MOLE		SEAL		Amount	
Diam.	From To	Material	From To	From To	Amount
14	0 18	BENTONITE	0 18	21	SACKS

Seal placement method POURED IN  
 Backfill: from \_\_\_\_\_ ft to \_\_\_\_\_ ft Material \_\_\_\_\_  
 Gravel: from \_\_\_\_\_ ft to \_\_\_\_\_ ft Size \_\_\_\_\_

(12) LOG:

Material	Ground elevation		SWL
	From	To	
TOP SOIL	0	2	
RED CLAY	2	18	

(6) CASING/LINER:  

Casing	Diam.	From To	Gauge	Material	Connection
B	+1	18	.250	STEEL	WELDED

Liner \_\_\_\_\_  
 Final Location of shoe(s) NONE

(7) PERFORATIONS/SCREENS:  
 Perf. Method \_\_\_\_\_  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_  

From	To	Slot Size	Number	Diam.	Tele/pipe Size	Casing/liner
_____	_____	_____	_____	_____	_____	_____

Date started 11/26/97 Completed 11/30/97

(8) WELL TESTS: Minimum testing time is 1 hour  
 Test type \_\_\_\_\_  

Yield GPM	Draw-down	Drill stem at	Time 1 hr.
_____	_____	_____	_____

(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 my best knowledge and belief.

Signed \_\_\_\_\_ WMC Number \_\_\_\_\_  
 Date \_\_\_\_\_

Temperature of water 27 Depth Artesian Flow Found \_\_\_\_\_  
 Mac water analysis done? NO By whom \_\_\_\_\_  
 Reason for water not suitable for use \_\_\_\_\_  
 Depth of strata \_\_\_\_\_

(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.

Signed [Signature] WMC Number 616  
 Date 12/25/97

T 10901

WATER RESOURCES DEPT.  
 Well # SALEM, OREGON

(1) OWNER:  
 Name PATTERSON NURSERY SALES  
 Address 14990 SE ORIENT DRIVE  
 City BORING St OR Zip 97009

(2) TYPE OF WORK: NEW WELL

(3) DRILL METHOD: ROTARY&CABLE

(4) PROPOSED USE: IRRIGATION

(5) BORE HOLE CONSTRUCTION:

Special Construction Approval NO	Depth of Compl. Well	540 ft				
Explosives used NO	Type	Amount				
HOLE SEAL						
Diam.	From	To	Material	From	To	Amount
14	0	90	CEMENT	0	250	175 BAGS
12	90	250				
10	250	540				

Seal placement method C&SET PLUG&PUSH  
 Backfill: from \_\_\_ ft to \_\_\_ ft Material  
 Gravel: from \_\_\_ ft to \_\_\_ ft Size

(6) CASING/LINER:

Diam.	From	To	Gauge	Material	Connection
Casing 10	+1	250	.250	STEEL	WELDED
Liner 8	0	540	.250	STEEL	WELDED

Final Location of shoe(s) \_\_\_\_\_

(7) PERFORATIONS/SCREENS:

From	To	Slot Size	Number	Diam.	Tele/pipe Size	Casing/liner
280	540	.018			8" PIPE	LINER

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

Test type	Draw-down	Drill stem at	Time
PUMP	147		1 hr.
	147		8 hr

Temperature of water 51F Depth Artesian Flow Found \_\_\_\_\_  
 Was water analysis done? NO By whom \_\_\_\_\_  
 Reason for water not suitable for use \_\_\_\_\_  
 Depth of strata \_\_\_\_\_

(9) LOCATION OF WELL by legal description:  
 County CLACK Lat. " " " Long. " " "  
 Township 2 S Range 4 E UN.  
 Section 10 NE 1/4 NW 1/4  
 Tax Lot Lot Block Subdivision  
 Street Address of Well (or nearest Address)  
 NEAR 34962 SE KELSO ROAD BORING, OR 97009

(10) STATIC WATER LEVEL:  
 283 ft. below land surface. Date 8-19-01  
 Artesian pressure \_\_\_ lb per square in. Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found	170		
From	To	Est Flow Rate	SAL
170	200	20+ GPM	140
290	510	150+ GPM	283

(12) WELL LOG:

Material	From	To	SAL
TOP SOIL	0	2	
BROWN CLAY	2	38	
CEMENTED GRAVEL & BOULDERS	38	170	
LIGHTLY CEMENTED GRAVEL	170	200	140
BLACK SANDSTONE	200	290	
BLACK MEDIUM SAND	290	340	283
FINE BLACK SAND	340	348	283
MEDIUM BLACK SAND	348	403	283
FINE GRAY SAND	403	408	283
MEDIUM BLUE SAND	408	420	283
VERY FINE BLUE SAND	420	445	283
MEDIUM BLACK SAND	445	463	283
VERY FINE BLACK SAND	463	477	283
MEDIUM BLACK SAND	477	510	283
MEDIUM BLACK SAND SEAMS OF BLUE CLAY	510	520	283
BLUE CLAY	520	540	
BLANK PIPE	0	290	

Date started 5-23-01 Completed 8-19-01

(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 my best knowledge and belief.

Signed \_\_\_\_\_ Date \_\_\_\_\_  
 UAC Number \_\_\_\_\_

(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.

Signed *[Signature]* Date 7-9-01  
 UAC Number 616

T 13301

OWNER: Well No. L48496  
Name PATTERSON NURSERY SALES  
Address 14990 SE ORIENT DRIVE  
City BORING St OR Zip 97009

(9) LOCATION OF WELL by legal description:  
County CLACK Lat. " " " Long. " " "  
Township 2 S Range 4 E W. 1/4  
Section 10 NE 1/4 NW 1/4  
Tax Lot Lot Block Subdivision  
Street Address of Well (or nearest Address)  
NEAR 34962 SE KELSO ROAD BORING, OR 97009

(2) TYPE OF WORK: NEW WELL

(3) DRILL METHOD: ROTARY/CABLE

(4) PROPOSED USE: IRRIGATION

(10) STATIC WATER LEVEL:  
283 ft. below land surface. Date 8-19-01  
Artesian pressure \_\_\_\_\_ lb per square in. Date \_\_\_\_\_

(5) BORE HOLE CONSTRUCTION:

Special Construction	Approval NO	Depth of Compl.	Well	540 ft		
Explosives used	NO	Type	Amount			
HOLE		SEAL				
Diam.	From	To	Material	From	To	Amount
14	0	90	CEMENT	0	250	175 SACKS
12	90	250				
10	250	540				

(11) WATER BEARING ZONES:

Depth at which water was first found	170			
From	To	Est Flow Rate	SML	
170	200	20+ GPM	140	
290	510	150+ GPM	283	

Seal placement method CESET PLUG/PUSH  
Backfill: from \_\_\_\_\_ ft to \_\_\_\_\_ ft Material \_\_\_\_\_  
Gravel: from \_\_\_\_\_ ft to \_\_\_\_\_ ft Size \_\_\_\_\_

(12) WELL LOG:

Material	Ground elevation		SML
	From	To	
SS SCREEN	290	300	
BLACK PIPE	300	310	
SS SCREEN	310	320	
BLANK PIPE	320	330	
SS SCREEN	330	340	
BLANK SCREEN	340	350	
SS SCREEN	350	360	
BLANK PIPE	360	370	
SS SCREEN	370	380	
BLANK PIPE	380	390	
SS SCREEN	390	400	
BLANK PIPE	400	410	
SS SCREEN	410	420	
BLANK PIPE	420	430	
SS SCREEN	430	440	
BLANK PIPE	440	450	
SS SCREEN	450	460	
BLANK PIPE	460	480	
SS SCREEN	480	490	

Date started 5-23-01 Completed 8-19-01

RECEIVED  
SEP 13 2001  
WATER RESOURCES DEPT.  
SALEM, OREGON

(6) CASING/LINER:

Diam.	From	To	Gauge	Material	Connection
Casing 10	+1	250	.250	STEEL	WELDED
Liner 8	0	540	.250	STEEL	WELDED

Final Location of shoe(s) \_\_\_\_\_

(7) PERFORATIONS/SCREENS:

Perf. Method		Screens Type		WRAPPED		Material		STAINLESS STEEL	
From	To	Slot Size	Number	Diam.	Size	Case/liner	Size	Case/liner	Material
280	540	.018			8" PIPE	LINER			

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

Test type	PUMP	Draw-down	Drill stem	Time
Yield GPM			at	
190		147		1 hr.
190		147		8 hr

(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 my best knowledge and belief.

Signed \_\_\_\_\_ Date \_\_\_\_\_  
LIC Number \_\_\_\_\_

(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.

Signed *Sean W. Sullivan* Date 9-9-01  
LIC Number 616

T 10801

