

Approved:



MEMO

To: Kristopher Byrd, Well Construction Manager
From: Tommy Laird, Well Construction Program Coordinator
Subject: Review of Water Right Application G-19282
Date: October 23, 2024

The attached application was forwarded to the Well Construction Section by the Groundwater Section. Dennis Orłowski reviewed the application. Please see Dennis' Groundwater Review and the Well Reports.

Applicant's Well #1 (CLAC 54178): Based on a review of the Well Report, Applicant's Well #1 seems to protect the groundwater resource.

The construction of Well #1 may not satisfy hydraulic connection issues.

Applicant's Well #2 (CLAC 56492): Based on a review of the Well Report, Applicant's Well #2 seems to protect the groundwater resource.

The construction of Well #2 may not satisfy hydraulic connection issues.

Applicant's Well #3 (CLAC 75335): Based on a review of the Well Report, Applicant's Well #3 seems to protect the groundwater resource.

The construction of Well #3 may not satisfy hydraulic connection issues.

Applicant's Well #4 (CLAC 75720): Based on a review of the Well Report, Well #4 does not appear to comply with current minimum well construction standards (See OAR 690 Division 210). The problem is that according to the Water Supply Well Report, the well is not sealed to the proper depth. In order to meet minimum construction standards, the well must be resealed with an approved grout to a minimum depth of 222 feet bgs.

My recommendation is that the Department not issue a permit for Well #4 unless it is brought into compliance with current minimum well construction standards or information is provided showing that it is constructed to meet current minimum well construction standards.

The construction of Well #4 may not satisfy hydraulic connection issues.

Applicant's Well #5 (CLAC 72846): Based on a review of the Well Report, Applicant's Well #5 seems to protect the groundwater resource.

The construction of Well #5 may not satisfy hydraulic connection issues.

Applicant's Well #7 (CLAC 75843): Based on a review of the Well Report, Applicant's Well #7 seems to protect the groundwater resource.

The construction of Well #7 may not satisfy hydraulic connection issues.

CLAC
54178

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

WELL I.D. # L 28524
START CARD # 120449

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

(1) OWNER: Well Number #1
Name Bill Patterson
Address P.O. Bx 99
City Boonville State Or Zip 97009

(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 280 ft.
Explosives used Yes No Type _____ Amount _____

HOLE		SEAL	
Diameter	From To	Material	From To Sacks or pounds
12"	0 65	Cement	0 193 51 Sacks
10"	65 193		
8"	193 280		

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: 8"	+2	195	258	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 6"	180	240	200	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

Perforations Method _____
 Screens Type 1026T Material PUL

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
240	280	1026T		6"	4-10'	<input type="checkbox"/> screen	<input type="checkbox"/>

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
40+	3'		1 hr.

Temperature of water 56 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 Clatsop Latitude _____ Longitude _____
Township 28 N or S Range 4E E or W. WM.
Section 31 NW 1/4 SE 1/4
Tax Lot 3900 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 29105 SE WEITZ Ln., Eagle creek Or. 97022

(10) STATIC WATER LEVEL:
248 ft. below land surface. Date 12-17-98
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 248

From	To	Estimated Flow Rate	SWL
35	58	Sealed OFF	22
248	256	46+	

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(12) WELL LOG:
Ground Elevation _____ WATER RESOURCES DEPT. SALEM, OREGON

Material	From	To	SWL
Top Soil	0	2	
Clay + Balders	2	35	
Gravel + Balders	35	58	22
Clay Blue	58	65	
Clay Gray	65	160	
Clay Blue	160	170	
Clay Gray	170	210	
Clay Blue	210	215	
Clay Gray	215	235	
Clay Blue	235	248	
Sand Multi Colored	248	256	122
Clay Gray	256	270	
Clay Blue	270	280	

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WATER RESOURCES DEPT. SALEM, OREGON

Date started 11-25-98 Completed 12-17-98
(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.

Signed Thomas Young WWC Number 1512 Date 12-17-98

(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 W. O. Young WWC Number 257 Date 12-17-98

(1) OWNER: Well No. L44582
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 AIR

(4) PROPOSED USE: IRRIGATION

(5) BORE HOLE CONSTRUCTION:
Special Construction Approval NO _____ Depth of Compl. Well 280 ft
Explosives used NO _____ Type _____ Amount _____

HOLE			SEAL			
Diam.	From	To	Material	From	To	Amount
14	0	62	CEMENT	0	62	39 SACKS
12	62	195	CEMENT	175	195	42 SACKS
8	195	280				

Seal placement method C
Backfill: from _____ ft to _____ ft Material _____
Gravel: from _____ ft to _____ ft Size _____

(6) CASING/LINER:

	Diam.	From	To	Gauge	Material	Connection
Casing	10	+1	195	.250	STEEL	WELDED
	8	+2	210	.250	STEEL	WELDED
Liner						

Final Location of shoe(s) 195' 9 1/2" TUBEX

(7) PERFORATIONS/SCREENS:

Perf. Method _____
 Screens Type _____ Material _____

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

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

Yield GPM	Draw-down	Drill stem at	Time
80		280	1 hr.
80		280	2 hr

Temperature of water 54F 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 WM.
Section 31 NW 1/4 SE 1/4
Tax Lot 3900 Lot Block Subdivision
Street Address of Well (or nearest Address)
29105 SE WEITZ ROAD EAGLE CREEK, OR 97022

(10) STATIC WATER LEVEL:
122 ft. below land surface. Date 1/25/01
Artesian pressure _____ lb per square in. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 20

From	To	Est Flow Rate	SWL
20	54	20+ GPM	18
240	260	80+ GPM	122

(12) WELL LOG:

Material	Ground elevation _____		SWL
	From	To	
TOP SOIL	0	2	
SOIL & CLAY	2	4	
BROWN CLAY	4	10	
GRAVEL, BOULDERS & SAND	10	54	18
BLUE CLAY	54	90	
GRAY SAND & CLAY	90	111	
BLUE CLAY	111	146	
GRAY CLAY	146	192	
BLUE CLAY	192	240	
BLUE CLAY WITH SEAMS OF COARSE CEMENTED SAND	240	260	122
BLUE CLAY	260	280	

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WATER RESOURCES DEPT.
SALEM, OREGON

Date started 1/10/01 Completed 1/25/01

(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 _____ WWC Number _____
Date _____

(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 *Tea W. Williams* WWC Number 616
Date 1/25/01

(1) LAND OWNER
Owner Well I.D. _____
First Name _____ Last Name _____
Company PATTERSON NURSERY SALES
Address PO BOX 99
City BORING State OR Zip 97009

(2) TYPE OF WORK New Well Deepening Conversion
 Alteration (complete 2a & 10) Abandonment (complete 5a)

(2a) PRE-ALTERATION
Dia + From To Gauge Stl Plstc Wld Thrld
Casing: _____
Material From To Amt sacks/lbs
Seal: _____

(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 380.00 ft.
BORE HOLE
Dia From To Material From To Amt sacks/lbs
12 0 161 Cement 0 161 80 S
6 161 380 Calculated 25
Calculated

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 _____

(5a) ABANDONMENT USING UNHYDRATED BENTONITE
Proposed Amount _____ Actual Amount _____

(6) CASING/LINER
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrld
 8 1 161 .25
 6 161 290 .25
Shoe Inside Outside Other Location of shoe(s) 380
Temp casing Yes Dia _____ From + _____ To _____

(7) PERFORATIONS/SCREENS
Perforations Method _____
Screens Type Johnson Material Stainless steel
Perf/ Casing/ Screen Dia From To Scrn/slot Slot # of Tel/
Screen Liner Dia From To width length slots pipe size
Screen Casing 6 290 380 12 _____ _____ _____

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)
100 _____ 380 2.5
Temperature 55 °F Lab analysis Yes By _____
Water quality concerns? Yes (describe below) TDS amount 57 ppm
From To Description Amount Units

(9) LOCATION OF WELL (legal description)
County CLACKAMAS Twp 2.00 S N/S Range 4.00 E E/W WM
Sec 31 SW 1/4 of the NE 1/4 Tax Lot 2700
Tax Map Number _____ Lot _____
Lat _____ " or _____ DMS or DD
Long _____ " or _____ DMS or DD
 Street address of well Nearest address
29300 SE BURNETT RD EAGLE CREEK OR 97022

(10) STATIC WATER LEVEL

Existing Well / Pre-Alteration	Date	SWL(psi)	+	SWL(ft)
Completed Well	9/30/2019			178

Flowing Artesian? Dry Hole?

WATER BEARING ZONES Depth water was first found 365.00

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
9/30/2019	365	380	100			178

(11) WELL LOG Ground Elevation _____

Material	From	To
Brown clay w/ cobbles/boulders	0	64
Gray clay	64	81
Blue clay	81	89
Brown clay	89	110
Gray clay	110	125
Brown clay	125	138
Gray clay	138	164
Brown clay	164	210
Gray clay	210	263
Small white gravel w/ wood	263	365
Gray gravel w/ seams of blue clay	365	375
Gray gravel w/ seams of blue clay	365	375
Brown sandstone	375	380

Date Started 8/2/2019 Completed 9/30/2019

(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 1738 Date 10/18/2019
Signed VANCE WAGNER (E-filed)

(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 1738 Date 10/18/2019
Signed VANCE WAGNER (E-filed)
Contact Info (optional) _____

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

WELL I.D. LABEL# L 118532
START CARD # 212551
ORIGINAL LOG #

(1) LAND OWNER
Owner Well I.D.
First Name Last Name
Company Patterson Nursery Sales, Inc.
Address PO Box 99
City Boring State OR Zip 97009

(2) TYPE OF WORK
[X] New Well [] Deepening [] Conversion
[] Alteration (complete 2a & 10) [] Abandonment (complete 5a)

(2a) PRE-ALTERATION
Dia + From To Gauge Stl Plstc Wld Thrd
Casing:
Material From To Amt sacks/lbs
Seal:

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

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

(5) BORE HOLE CONSTRUCTION
Depth of Completed Well 432 ft. Special Standard (Attach copy)

Table with columns: Dia, From, To, Material, From, To, Amt, lbs. Rows include Cement and Bentonite Chips.

How was seal placed: Method [] A [] B [X] C [] D [] E
[X] Other Pour & Probe Bent.

Backfill placed from 432 ft. to 446 ft. Material Pea Gravel

Filter pack from 200 ft. to 250 ft. Material CSSI Size 10/20

Explosives used: [] Yes Type Amount

(5a) ABANDONMENT USING UNHYDRATED BENTONITE
Proposed Amount Pounds Actual Amount Pounds

(6) CASING/LINER
Table with columns: Casing, Liner, Dia, From, To, Gauge, Stl, Plstc, Wld, Thrd. Includes handwritten notes like '5A', '3', '5', '6', '8x6'.

Shoe [] Inside [] Outside [] Other Location of shoe(s)
Temp casing [] Yes Dia From To

(7) PERFORATIONS/SCREENS
Perforations Method
Screens Type V-Shaped Wire Wrap Material 304SS

Table with columns: Perf/Screen, Casing/Liner, Dia, From, To, Scrn/slot width, Slot length, # of slots, Tel/pipe size. Includes handwritten 'cont.' and 'PS'.

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

Table with columns: Yield gal/min, Drawdown, Drill stem/Pump depth, Duration (hr). Values: 65, 89, 8.

Temperature 56 °F Lab analysis [] Yes By
Water quality concerns? [] Yes (describe below) TDS amount 120 ppm

Table with columns: From, To, Description, Amount, Units.

(9) LOCATION OF WELL (legal description)
County CLACKAMA Twp 2 S N/S Range 4 E E/W WM
Sec 31 SE 1/4 of the NW 1/4 Tax Lot 1400
Tax Map Number 24E31B Lot
Lat ' " or DMS or DD
Long ' " or DMS or DD

Street address of well [] Nearest address []
29300 SE Burnett Rd, Eagle Creek, OR 97022

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Pre-Alteration
Completed Well 01-19-2017 138
Flowing Artesian? [] Dry Hole? []

WATER BEARING ZONES
Depth water was first found 2
SWL Date From To Est Flow SWL(psi) + SWL(ft)
Table with handwritten 'N.M.' and values like 2, 49, 90, 133.

(11) WELL LOG
Ground Elevation
Material From To

Table for well log with columns: Material, From, To. Includes 'See Attached Formation Log' and a large 'RECEIVED BY OWRD FEB 06 2017 SALEM, OR' stamp.

Date Started 11-15-2016 Completed 01-20-2017

(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 1797 Date 02-01-2017
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 649 Date 02-01-2017
Signed [Signature]
Contact Info (optional)

Clac 72846

**Patterson - Well # 5 Replacement
Start Card # 212551 - Well Tag ID # L 118532
Formation Log
by Schneider Water Services**

<u>FM</u>	<u>TO</u>	<u>DESCRIPTION</u>
0	2	Topsoil
2	7	Cobbles and gravel, with clay, tan soft, with sand brown, medium-fine
7	49	Cobbles and gravel, with sand brown, medium-fine
49	51	Clay, brown, medium, sandy
51	90	Clay, blue-grey, soft-medium, sticky
90	133	Sand, grey and black, fine
133	193	Clay, green, medium
193	204	Clay, dark grey, soft-medium, sticky
204	216	Clay, grey, medium
216	224	Clay, dark brown, soft-medium
224	229	Clay, dark grey, with sand, dark grey, cemented, hard
229	232	Sand, dark grey, fine
232	234	Clay, green, soft
234	236	Sand, black, medium-coarse, occasional gravel, 1/4" minus
236	238	Clay, grey, medium
238	240	Claystone, light grey, with sand, medium-coarse
240	250	Clay, green, medium
250	260	Clay, grey, soft-medium, silty
260	284	Clay, green medium
284	292	Clay, grey, medium
292	293	Clay, green, medium
293	301	Clay, blue, medium
301	310	Clay, brown, medium, sticky
310	313	Clay, multicolored, soft
313	315	Clay, red, soft-medium
339	349	Clay, brown, medium, some sand, brown, fine-medium
349	351	Pumice, grey, medium
351	358	Clay, brown, medium
358	363	Sand, grey, medium-fine
363	367	Clay, light brown, medium
367	372	Clay, brownish red, soft-medium, with cemented sand, grey, medium-fine
372	390	Sand, multicolored, fine-course
390	411	Siltstone, brown, hard, with some rock
411	422	Sandstone, grey, soft-hard, with some rock
422	442	Rock, grey, medium, some fractures, some weathering, occasional rock, brown, medium
442	444	Rock, brown and grey, soft-medium, with clay, grey hard
444	446	Rock, grey & brown, soft-medium, with clay grey hard

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FEB 06 2017

SALEM, OR

CLAC 72846

NW1/4 SECTION 31 T.2S. R.4E. W.M.
CLACKAMAS COUNTY

This map was prepared for
assessment purpose only.

1" = 200'

SEE MAP 2 4E 30

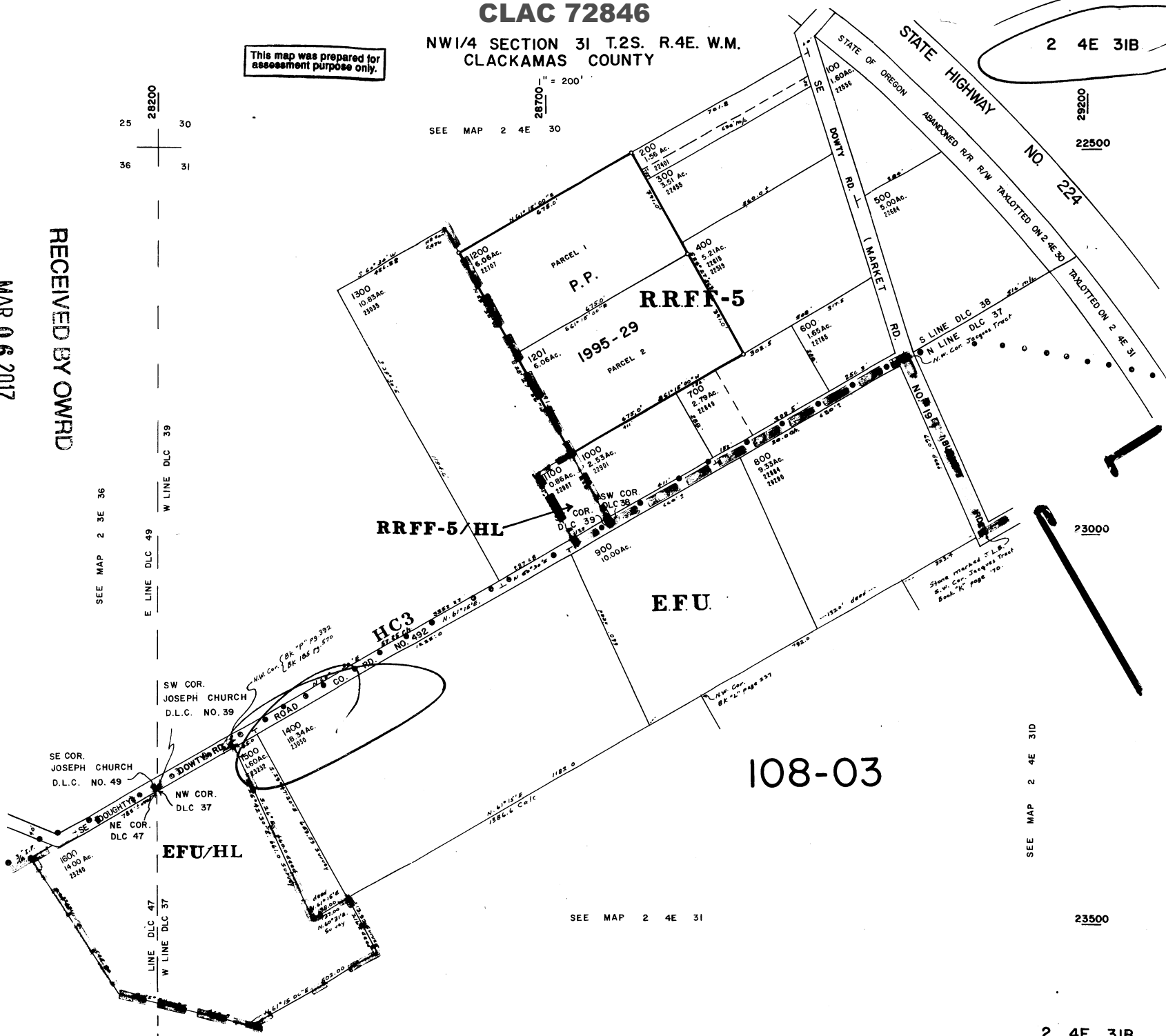
2 4E 31B

28200
25 30
36 31

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MAR 06 2017

SALEM, OR



SEE MAP 2 3E 36

W LINE DLC 39
E LINE DLC 49

SW COR.
JOSEPH CHURCH
D.L.C. NO. 39

SE COR.
JOSEPH CHURCH
D.L.C. NO. 49

NW COR.
DLC 37

NE COR.
DLC 47

EFU/HL

LINE DLC 47
W LINE DLC 37

RRFF-5/HL

EFU

HC3

108-03

SEE MAP 2 4E 31

23500

SEE MAP 2 4E 31D

23000

22500

2 4E 31B

BOOK 22

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

CLAC 75843

WELL I.D. LABEL# L 137486
START CARD # 1047542
ORIGINAL LOG #

6/24/2020

(1) LAND OWNER

Owner Well I.D.
First Name Last Name
Company PATTERSON NURSERY SALES
Address PO BOX68
City EAGLE CREEK State OR Zip 97022

(2) TYPE OF WORK

[X] New Well [] Deepening [] Conversion
[] Alteration (complete 2a & 10) [] Abandonment(complete 5a)

(2a) PRE-ALTERATION

Casing: Dia + From To Gauge Stl Plstc Wld Thrld
Material From To Amt sacks/lbs
Seal:

(3) DRILL METHOD

[X] Rotary Air [] Rotary Mud [] Cable [] Auger [] Cable Mud
[] Reverse Rotary [] Other

(4) PROPOSED USE

[] Domestic [X] Irrigation [] Community
[] Industrial/ Commercial [] Livestock [] Dewatering
[] Thermal [] Injection [] Other

(5) BORE HOLE CONSTRUCTION

Depth of Completed Well 400.00 ft. Special Standard [] (Attach copy)

Table with columns: Dia, From, To, Material, From, To, Amt, lbs. Rows include Cement w/2% Bentonite and Bentonite Chips.

How was seal placed: Method [] A [] B [X] C [] D [] E

[X] Other POURED & HYDRATED

Backfill placed from ft. to ft. Material

Filter pack from ft. to ft. Material Size

Explosives used: [] Yes Type Amount

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount Actual Amount

(6) CASING/LINER

Table with columns: Casing, Liner, Dia, From, To, Gauge, Stl, Plstc, Wld, Thrld. Includes shoe location and temp casing info.

(7) PERFORATIONS/SCREENS

Perforations Method push down perforator

Screens Type factory slot Material pvc

Table with columns: Perf, Casing/Screen, Dia, From, To, Scrn/slot width, Slot length, # of slots, Tele/pipe size.

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

[X] Pump [] Bailer [] Air [] Flowing Artesian

Table with columns: Yield gal/min, Drawdown, Drill stem/Pump depth, Duration (hr). Values: 180, 62, 336, 8.

Temperature 57 °F Lab analysis [] Yes By

Water quality concerns? [] Yes (describe below) TDS amount 112 ppm

Table with columns: From, To, Description, Amount, Units.

(9) LOCATION OF WELL (legal description)

County CLACKAMAS Twp 2.00 S N/S Range 4.00 E E/W WM
Sec 31 SW 1/4 of the NE 1/4 Tax Lot 2700
Tax Map Number Lot
Lat ' " or DMS or DD
Long ' " or DMS or DD
[] Street address of well [] Nearest address

(10) STATIC WATER LEVEL

Table with columns: Existing Well / Pre-Alteration, Date, SWL(psi), SWL(ft). Values: 6/18/2020, 137.3.

Flowing Artesian? [] Dry Hole? []

WATER BEARING ZONES

Depth water was first found 250.00

Table with columns: SWL Date, From, To, Est Flow, SWL(psi), SWL(ft). Values: 6/18/2020, 250, 360, 180, 137.3.

(11) WELL LOG

Ground Elevation

Table with columns: Material, From, To. Lists soil layers like brown clay, gravel & cobbles, etc.

Date Started 6/3/2020 Completed 6/18/2020

(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.

License Number Date

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.

License Number 1771 Date 6/24/2020

Signed GEORGE YOUNGBERG (E-filed)

Contact Info (optional) Youngberg Pump & Well Drilling ph. 503-630-3970

