

TO: Water Rights Section

March 15, 199²⁰⁰⁰

FROM: Groundwater/Hydrology Section

Don Miller

Reviewer's Name

SUBJECT: Application G-15093

G15093

GROUNDWATER/SURFACE WATER CONSIDERATIONS

1. PER THE Columbia Basin rules, one or more of the proposed POA's is/is not within _____ feet/mile of a surface water source (_____) and taps a groundwater source hydraulically connected to the surface water.

Not Applicable -> there is no SW/GW rule for OAR 690-519 (Col. Basin Program)

2. BASED UPON OAR 690-09 currently in effect, I have determined that the proposed groundwater use

a. _____ will, or _____ have the potential for substantial interference with the nearest surface water source, namely _____; or

b. X will not _____ surface water source, namely _____; or

c. _____ will if properly conditioned, adequately protect the surface water from interference:

- i. _____ The permit should contain condition #(s) _____;
- ii. _____ The permit should contain special condition(s) as indicated in "Remarks" below;
- iii. _____ The permit should be conditioned as indicated in item 4 below; or

d. _____ will, with well reconstruction, adequately protect the surface from substantial interference.

GROUNDWATER AVAILABILITY CONSIDERATIONS

3. BASED UPON available data, I have determined that groundwater for the proposed use

a. X will, or _____ likely be available in the amounts requested without injury to prior rights

b. _____ will not _____ and/or within the capacity of the resource; or

c. _____ will if properly conditioned, avoid injury to existing rights or to the groundwater resource:

- i. _____ The permit should contain condition #(s) _____;
- ii. _____ The permit should contain special condition(s) as indicated in "Remarks" below;
- iii. _____ The permit should be conditioned as indicated in item 4 below; or

4. a. _____ THE PERMIT should allow groundwater production from no deeper than _____ ft. below land surface;

b. _____ The permit should allow groundwater production from no shallower than _____ ft. below land surface;

c. _____ The permit should allow groundwater production only from the _____ groundwater reservoir between approximately _____ ft. and _____ ft. below land surface;

d. _____ Well reconstruction is necessary to accomplish one or more of the above conditions.

e. _____ One or more POA's commingle 2 or more sources of water. The applicant must select one source of water per POA and specify the proportion of water to be produced from each source.

REMARKS: _____

(Well Construction Considerations on Reverse Side)

G-15093

WELL CONSTRUCTION (If more than one well doesn't meet standards, attach an additional sheet.)

5. **THE WELL** which is the point of appropriation for this application does not meet current well construction standards based upon: *Ignore*
- a. review of the well log; *→ well #1 only (COLL 1413 + COLL 5073)*
 - b. field inspection by _____;
 - c. report of CWRE _____;
 - d. other: (specify) _____
6. **THE WELL** construction deficiency: *ignore*
- a. constitutes a health threat under Division 200 rules;
 - b. commingles water from more than one groundwater reservoir;
 - c. permits the loss of artesian head;
 - d. permits the de-watering of one or more groundwater reservoirs;
 - e. other: (specify) _____
7. **THE WELL** construction deficiency is described as follows: _____
8. **THE WELL**
- a. was, or _____ constructed according to the standards in effect at the time of
 - b. was not _____ original construction or most recent modification.
 - c. I don't know if it met standards at the time of construction.

RECOMMENDATION:

- A. I recommend including the following condition in the permit:
"No water may be appropriated under terms of this permit until the well(s) has been repaired to conform to current well construction standards and proof of such repair is filed with the Enforcement Section of the Water Resources Department."
- B. I recommend withholding issuance of the permit until evidence of well reconstruction is filed with the Enforcement Section of the Water Resources Department.
- C. REFER this review to Enforcement Section for concurrence.

THIS SECTION TO BE COMPLETED BY ENFORCEMENT PERSONNEL

I concur in G/H's recommendation A or B above relating to conditioning or withholding the permit.

_____, 199_____
(Signature)

I do not concur in G/H's recommendation A or B above relating to conditioning or withholding the permit for the following reasons: _____

_____, 199_____
(Signature)

**Water Right Conditions
Tracking Slip**

Groundwater/Hydrology Section

FILE # G-15093

ROUTED TO: WR'S

TOWNSHIP/

RANGE-SECTION: 5N/1W-28

CONDITIONS ATTACHED? yes no

REMARKS OR FURTHER INSTRUCTIONS:

Reviewer: D. Miller

WATER RESOURCES DEPARTMENT MEMORANDUM

TO: Groundwater/Hydrology Files

Date March 15, 2000

FROM: Donn Miller

SUBJECT: Groundwater Application G- 15093

Phone: _____

Name: Milou's Corp

Applicant(s) seek 50 gpm (_____ cfs) from 3 well(s) in the Columbia River basin

Proposed use: Quasi-municipal sub basin _____ sub basin _____

Pertinent 7 1/2-minute quads Deer Island

Well 1 WRD# ^{COLU 143} COLU 50731 T 5N R 1E S 28 00 County Columbia
 Legal Description S84°52'51" E, 824.46' to intersection of the Eastside Extension #
 Well is 1650 ft from unnamed trib McBride ck (river/stream) (1)
 Well is 2500 ft from Columbia River (river/stream) (2)
 Well elevation 440 ft River/stream elevation (1) 290 (2) 5 ft.
 Well elevation-river/stream elevation (1) 150 (2) 435
 Well depth 500 SWL 1357(?) on 10/20/97
 Sealed to 30 Depth first water found _____
 Cased to 75 Perforations/screens None
 Lined to 500 Perforations/screens 440-490
 Well tests and types 15 gpm / 1 hr air test
 Confined or unconfined? _____ Hydraulically connected? yes (1)
 Potential to cause substantial interference? NO

Well 2 WRD# ^{COLU} 51235 T 5N R 1E S 28 00 County Columbia
 Legal Description S84°52'51" E, 824.46' to intersection of the Eastside Extension #
 Well is 1650 ft from unnamed trib (1) (river/stream)
 Well is 2500 ft from Columbia River (2) (river/stream)
 Well elevation 440 ft River/stream elevation (1) 290 (2) 5 ft.
 Well elevation-river/stream elevation (1) 150 (2) 435
 Well depth 605 SWL 390 on 11/3/99
 Sealed to 299 Depth first water found 508
 Cased to 300 Perforations/screens _____
 Lined to 230-513 Perforations/screens _____
 Well tests and types 25 gpm / 1 hr air test
 Confined or unconfined? Confined Hydraulically connected? NO
 Potential to cause substantial interference? NO

Conditioned water rights in area: NO
 Other nearby water rights of record: NO
 Density of nearby wells of record: low

Comments * of the North Line of the Gough DLC and the East Line of the Nien DLC
 → Well 3 will be within 40' of 143 & comparably constructed → same
 revision as 142
 Almost no gw development from this same locality
 Well #1's log claims a shallow static but I seriously doubt it in light
 of COLU 51235 within 40'.
 References used: Well Reports, geologic maps

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

copy **RECEIVED**
 1413 JUN 29 1987

AUG 27 1987

WATER RESOURCES DEPT.
 SALEM, OREGON

Existing use well
 SN/2W-29
 1 29

(1) OWNER: **WATER RESOURCES DEPT.**
 Name JOIST PROBST SALEM, OREGON
 Address BOX 275 HICKS BLANCH
 City COLUMBIA CITY State OR Zip 97054

(2) TYPE OF WORK:
 New Well Deepen Recondition Abandon

(3) DRILL METHOD:
 Rotary Air Rotary Mud Cable Other

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Normal Injection Other

(5) BORE HOLE CONSTRUCTION:
 Depth of Completed Well _____ ft.
 Special Standards date of approval _____

HOLE		SEAL		Amount sacks or pounds	
meter	From To	Material	From To		
1 1/2	0	Gravel	0	30	10
6	30	190			

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:	6"	0	75	190	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		75	190	250	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:	5 1/4"	70	190		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

location of shoe(s) _____

(7) PERFORATIONS/SCREENS: NO

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"/>
						<input type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Pumping level	Drill stem at	Time
8	140		1/2 hr
5	160		1 hr

Temperature of water _____ 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 Columbia Latitude _____ Longitude _____
 Township 2 N or S, Range 24 E or W, WM.
 Section 29 _____
 Tax Lot _____ Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) _____

(10) STATIC WATER LEVEL:
138 ft. below land surface. Date 5-27-87
 Artesian pressure _____ lb. per square inch. Date _____

(11) WELL LOG: Ground elevation _____

Material	From	To	WB?	SWL
TOP SOIL	0	3		
YELLOW CLAY	5	50		
RED CLAY	50	75		
BROWN SAND SOIL	75	175		135
BROKEN ROCK	175	190		138

Owner says well deepened due to blasting

Date started 5-16-87 Completed 5-29-87

(unbonded) Water Well Constructor Certification:
 I constructed this well in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.
 Signed _____ Date _____

(bonded) Water Well Constructor Certification:
 I accept responsibility for construction of this well and its compliance with all Oregon water well standards. This report is true to the best of my knowledge and belief.
 Signed [Signature] Date 6-24-87
 Company [Signature] Job No. _____

colv
50731

RECEIVED

Deepening of
Existing use well

JUN 1 1998

JUL 30 1998

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.

WELL I.D. # L 19670
WATER RESOURCES DEPT CARD # 98747
SALEM, OREGON

(1) OWNER: Well Number _____
Name VORIS PROBST

Address 36380 MELONS LANE
City COLUMBIA CITY State OR Zip 97018

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

HOLE		SEAL		Sacks or pounds
Diameter	From To	Material	From To	
6	170	500		

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				Threaded
			Steel	Plastic	Welded		
Casing: <u>8</u>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner: <u>4.5</u>	<u>3</u>	<u>500</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:
 Perforations Method DRILL HOLE
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tubing/pipe size	Casing	Liner
<u>4.90</u>	<u>4.40</u>	<u>2</u>	<u>2 PER</u>		<u>4.5</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
<u>15.6 gpm</u>		<u>500</u>	<u>1 hr.</u>

Temperature of water 52° 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 COLUMBIA Latitude 1 Longitude _____
Township 5N N or S Range 2W E or W. WM.
Section 28 28 SE 1/4 NW 1/4
Tax Lot 0101 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 36380 MELONS LANE, COLUMBIA CITY OR 97018

(10) STATIC WATER LEVEL:
135 ft. below land surface. Date 10/20/97
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 450

From	To	Estimated Flow Rate	SWL
<u>450</u>	<u>480</u>	<u>15 GPM</u>	<u>185</u>

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
<u>BLACK BASALT</u>			
<u>W/ LAYERS OF</u>			
<u>TAN SANDSTONE</u>	<u>170</u>	<u>500</u>	<u>185</u>
<u>THIS WELL WAS COMPLETELY DRY WHEN DEEPENING BEGAN</u>			

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DEC 04 1998

WATER RESOURCES DEPT.
SALEM, OREGON

Date started 10/13/97 Completed 10/20/97

(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 _____

Signed _____ 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.

WWC Number 1480

Signed A.M.S. Smith Date 10/30/97

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

COLL
51235

new, currently unused well (no pump)
about 40' from existing well

WELL I.D. # L 37249
START CARD # 126910

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

(1) OWNER: Well Number _____
Name VORIS PROBST
Address 36380 MILORIS WAY
City COLUMBIA CITY State OR Zip 97018

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

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
10	0	100	Cem/Bent	0	100	
8	100	299	Cem/Bent	100	299	94 SKS
6	299	548				
5	548	605				

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: 6"	+2	300	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: 5"	230	503	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"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Diameter	Material	Casing	Liner
461	503	1/8x12	84		STEEL	<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"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
25		600	1 hr.

Temperature of water 56°F 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 COLUMBIA Latitude _____ Longitude _____
Township 5N N or S Range 1W E or W. WM.
Section 28 NE 1/4 SW 1/4
Tax Lot 300 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 36300 MILORIS WAY

(10) STATIC WATER LEVEL:
390 ft. below land surface. Date 11/03/99
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 508

From	To	Estimated Flow Rate	SWL
508	548	25 GPM	390
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NOV 09 1999			

(12) WELL LOG:
Ground Elevation _____

WATER RESOURCES DEPT
SALEM, OREGON

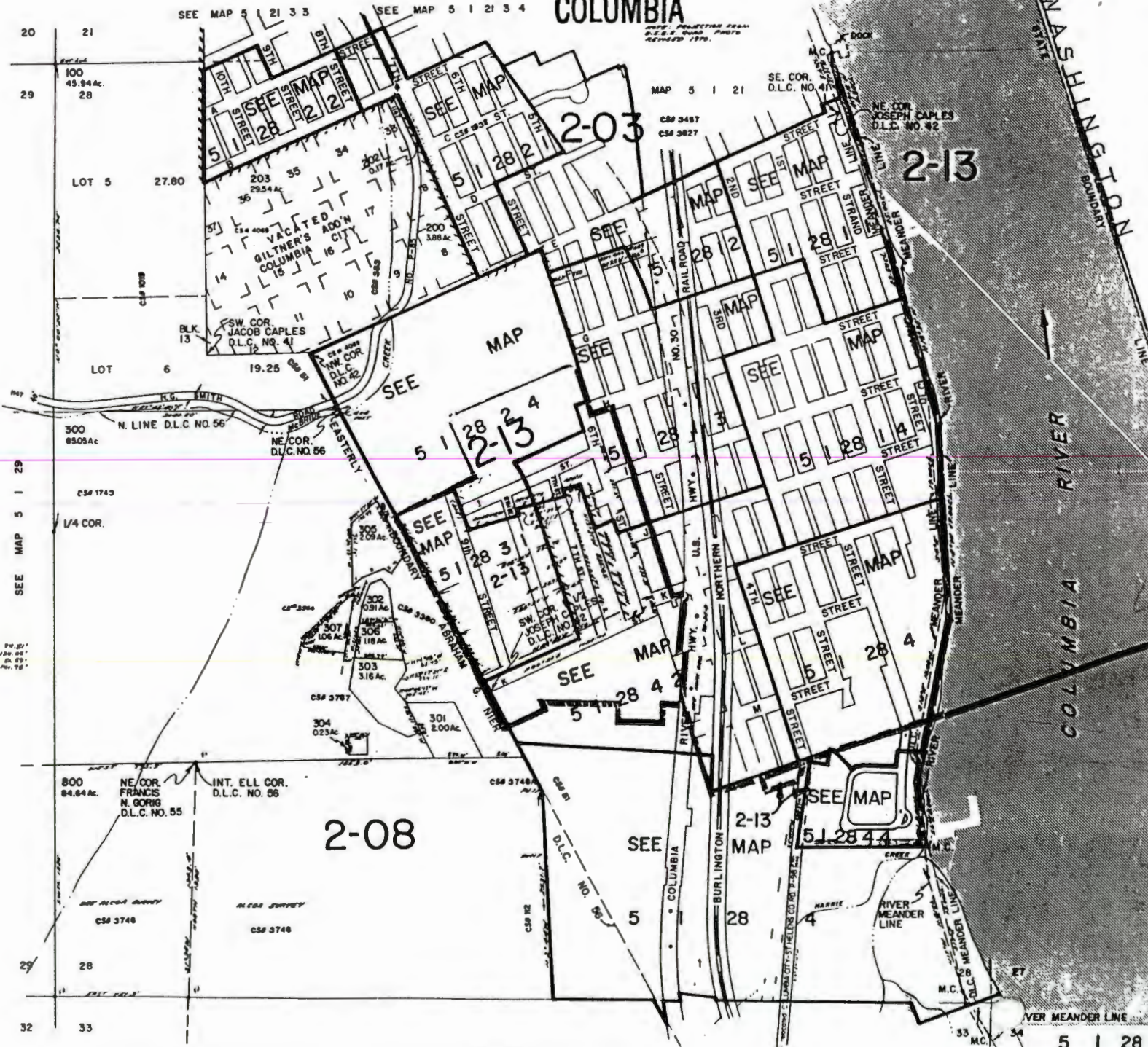
Material	From	To	SWL
Topsoil	0	2	
Brown silty clay	2	54	
Sticky dark brown clay	54	96	
Firm brown basalt	96	104	
Firm gray-black basalt	104	158	
Soft brown basalt	158	165	
Firm gray-black basalt	165	248	
VOID loss circ.-no returns	248	256	
Firm formation-no returns	256	296	
Firm gray-black basalt	296	393	
Hard gray basalt	393	458	
Firm gray-black basalt	458	468	
Firm blue-gray clatstone	468	500	
(caving)			
Firm gray-black basalt	500	605	390

Date started 10/11/99 Completed 11/03/99

(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 _____
Signed _____ 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.
WWC Number 1266
Signed _____ Date 11/05/99

SCALE 1:9600



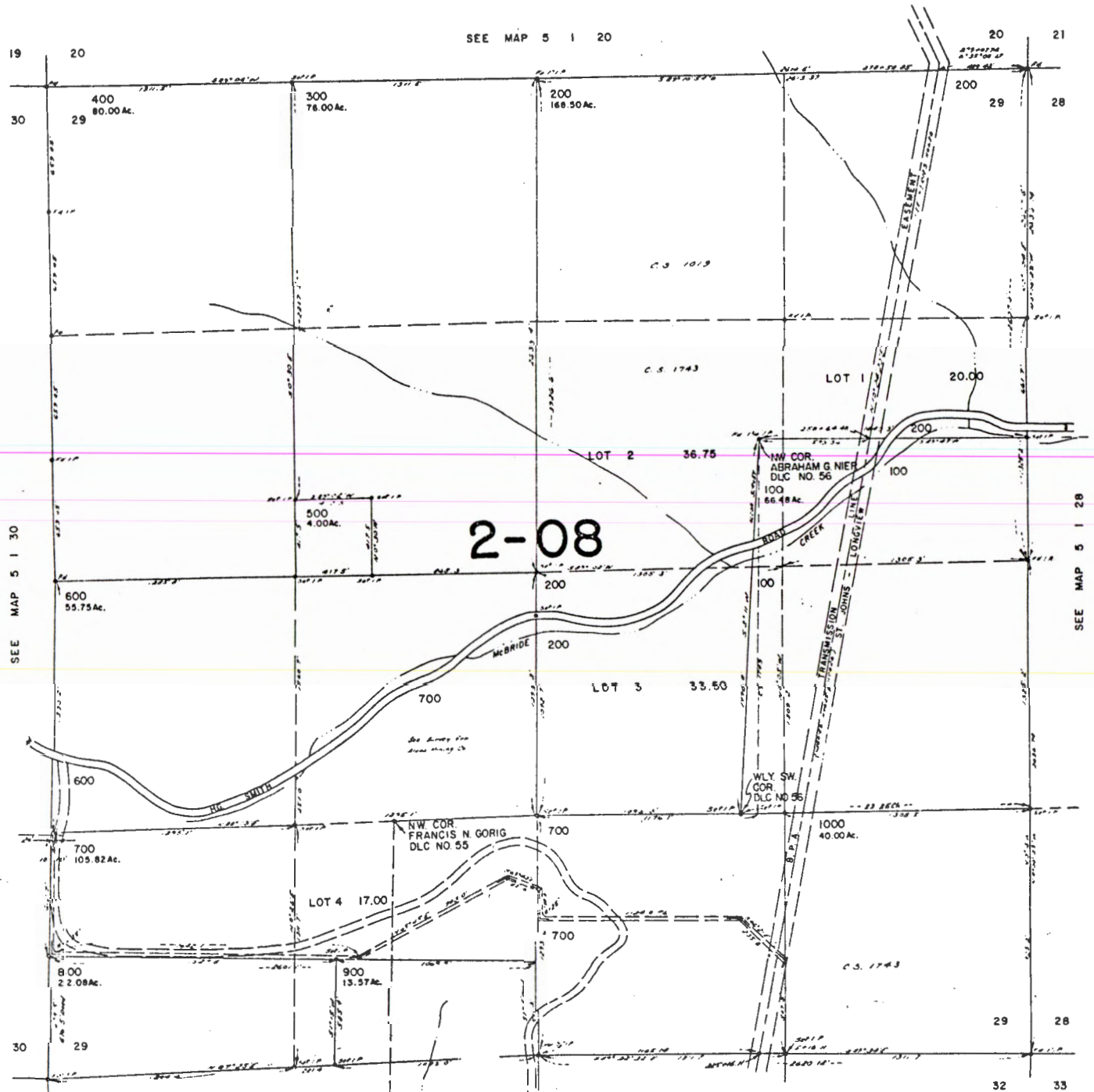
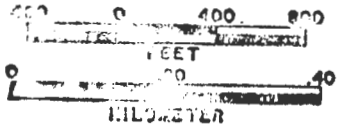
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JUN 17 1998
DEPT. OF REVENUE
STATE OF OREGON

5 | 28

SECTION 29 T.5N. R.1W. W.M.
COLUMBIA COUNTY
1" = 400'

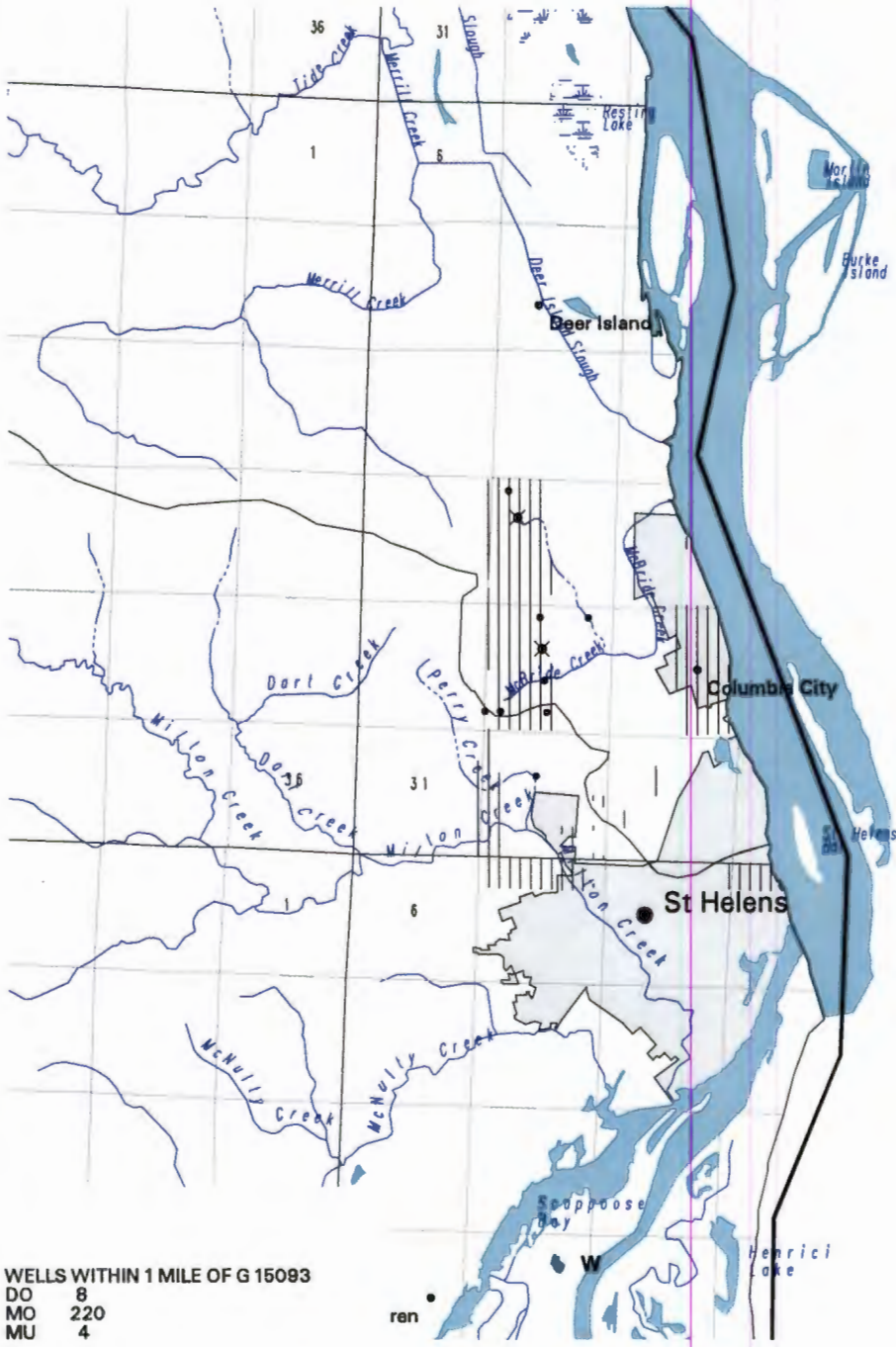
5 1 29

SCALE 1:9500.



Wells in the vicinity of application G 15093

- Application well(s) in this 1/4-1/4 section
- Well(s) identified in this section from OWRD's well log database within 1 mi. radius of application well(s)
- Well(s) identified in this 1/4-1/4 section from OWRD's well log database within 1 mi. radius of application well(s)
- ✱ Permitted well(s) in this 1/4-1/4 section within 1 mi. radius of application well(s)
- Conditioned, permitted well(s) in this 1/4-1/4 section within 5 mi. radius of application well(s)
- ▲ OWRD Observation well and well-id within 5 mi. radius of application well(s)
- Critical GW Area
- - - Regulated GW Area



5 N

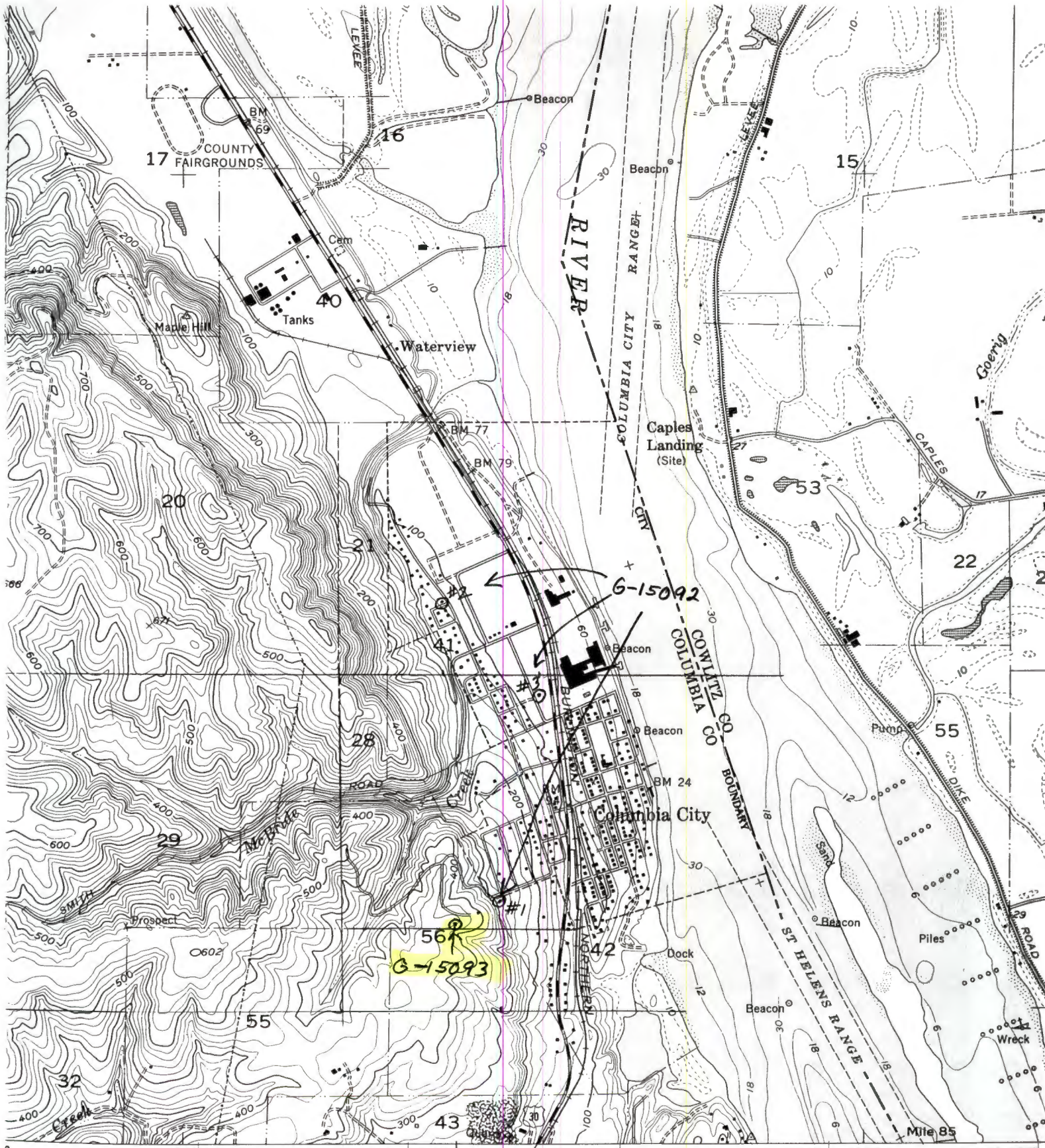
4 N

WELLS WITHIN 1 MILE OF G 15093
 DO 8
 MO 220
 MU 4

PERMITTED WELLS WITHIN 1 MILE OF APPLICATION G 15093

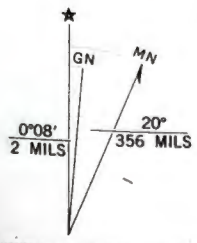
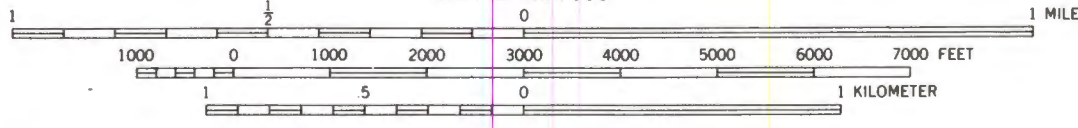
\$RECNO	APPLICATION	PERMIT	LOC-QQ	USE	RATE	DIV-UNITS
1	GR 282	GR 258	5.00N 1.00W21SWNE	MU	2083.0000	G
2	GR 2515	GR 3873	5.00N 1.00W28SENE	MU	100.0000	G

NO CONDITIONED WELLS WITHIN 1 MILE OF APPLICATION G 15093



(ST. HELENS) ST. HELENS 1.2 MI.
 1475 IV SE PORTLAND 30 MI.

SCALE 1:24000



CONTOUR INTERVAL 20 FEET
 DASHED LINES REPRESENT 10 FOOT CONTOURS
 NATIONAL GEODETIC VERTICAL DATUM OF 1929

OREGON

RECEIVED

COL 50672

DEC 15 1999

Amendment

Amended see #9

STATE OF OREGON WATER SUPPLY WELL REPORT

WATER RESOURCES DEPT. SALEM, OREGON

WELL ID # L 110031

START CARD # 1036666

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

(1) OWNER: Well Number

Name Chris Iverson Address 495 S 7th City St Helens State OR ZIP 97104

(2) TYPE OF WORK

New Well [X] Deepening [] Alteration (repair/recondition) [] Abandonment []

(3) DRILL METHOD:

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

(4) PROPOSED USE:

Domestic [X] Community [] Industrial [] Irrigation [] Thermal [] Injection [] Livestock [] Other []

(5) BORE HOLE CONSTRUCTION:

Special Construction approval [] Yes [X] No Depth of Completed Well 566ft Explosives used [] Yes [X] No Type Amount

Table with columns: HOLE, SEAL, Diameter, From, To, Material, From, To, Seal or points

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

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

(6) CASING/LINER:

Table with columns: Casing, Liner, Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded

Final location of shoe(s) 98'

(7) PERFORATIONS/SCREENS:

Perforations Method Saw Cut Screens Type Material

Table with columns: From, To, Slot, Number, Diameter, Telepipe, Casing, Liner

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

Pump [] Bailor [] Air [X] Artesian [] Yield gallons per minute 40 Drawdown 480 Drill stem seal Time 1 hr

Temperature of water 57 Depth Artesian Flow Found

Was a water analysis done? [] Yes By whom [] No 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 Columbia Latitude Longitude Township 5 R or S Range 1 E or W M Section 28 N.E. 1/4 H.W. 1A Tax Lot 00803 Lot Block Subdivision Street Address of Well (or nearest address) 36360 Smith Rd St Helens OR 97101

(10) STATIC WATER LEVEL:

360 ft. below land surface. Date 1-5-98 Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES:

Depth at which water was first found 458

Table with columns: From, To, Estimated Flow Rate, SWL

(12) WELL LOG:

Table with columns: Material, From, To, SWL

Date started 1-24-98 Completed 2-5-98

(embedded) 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.

TURNER WELL DRILLING SCAPPOOSE, OR 97056

(embedded) 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 1679 signed Date 4-14-98

STATE OF OREGON
Water Resources Department
158 12th St. N.E.
Salem, OR 97310

MEMORANDUM

DATE : 3/15/2000

TO: File G-15093
FROM: Donn Miller *DM*
SUBJECT: Conversation with applicant

I spoke to Mr Probst today about his application. It says that he would like three wells in all eventually and I wanted to discuss the matter.

He said that he now has two wells. One is a deepened well (COLU 1413 & 50731). This well has been in use. The second well is new (COLU 51235). He plans to install a pump and use it. These wells are within about 40 feet of each other.

He thinks that he will construct a third well in this cluster within five years. He expects a comparable depth as the current wells. At that rate my ground water review of a third well would not be different from that of the existing wells.

The application currently shows only one well on the map. That is the deepened well.

The deepened well seems odd. He reported that he needed to deepen after quarry blasting took the water away. This is puzzling since the deepening did not show a deeper static and the deep static of COLU 51235 did not occur. The deepened well may have a commingling issue but the well reports do not clearly show one.

We discussed the possibility of future permitting to include the additional two wells. He expressed his interest in including all three wells on this application. He is aware that revisions to the map are needed.

Please contact Mr Probst and tell him what he needs to provide to amend his application.