

JAN 23 2001

STATE OF OREGON WATER SUPPLY WELL REPORT

(as required by ORS 537.763) WATER RESOURCES DEPT. Instructions for completing this form are on the reverse of this form.

Bent 51700

WELL I.D.# L 34792 START CARD # 127769

(1) OWNER: Well Number _____ Name ONEER VILLAGE WATER CO.

Address PO BOX 771 City PHILOMATH State OR Zip 97370

(2) TYPE OF WORK: [] New Well [] Deepening [X] Alteration (repair/recondition) [] Abandonment

(3) DRILL METHOD: [] Rotary Air [] Rotary Mud [] Cable [] Auger [] Other NONE

(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 422 ft. Explosives used [] Yes [X] No Type _____ Amount _____

Table with columns for HOLE (Diameter, From, To) and SEAL (Material, From, To, Sacks or pounds). Row 1: NA

How was seal placed: Method [] A [] B [] C [] D [] E [] Other NONE

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

(6) CASING/LINER: Table with columns for Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Casing: 8, 1, 2, 250, [X], [], [X], []. Liner: NA

Final location of shoe(s) NA

(7) PERFORATIONS/SCREENS: NA. Table with columns for From, To, Slot size, Number, Diameter, Material, Tele/pipe size, Casing, Liner.

(8) WELL TESTS: Minimum testing time is 1 hour. [] Pump [] Bailer [] Air [] Flowing Artesian. Yield gal/min NA, Drawdown _____, Drill stem at _____, Time 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 BENTON Latitude 44°29'59" Longitude 123°25'55" Township 12S N or S Range 6W E or W. WM. Section 28 1/4 1/4 Tax Lot 900 Lot _____ Block _____ Subdivision _____ Street Address of Well (or nearest address) NORTH EAST OF 31765 M'LOUGHLIN DR. PHILOMATH OR

(10) STATIC WATER LEVEL: 325 ft. below land surface. Date 1-16-01 Artesian pressure _____ lb. per square inch. Date _____

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

Table with columns: From, To, Estimated Flow Rate, SWL. Row 1: NA

(12) WELL LOG: Ground Elevation _____

Table with columns: Material, From, To, SWL. Content: ALTERATION OF THIS WELL WAS LIMITED TO THE CHANGE IN THE DIAMETER AND HIGHT OF THE CASING TO ALLOW MORE HARDWARE SPACE THROUGH THE WELL SEAL ORIGINAL WELL LOG NO 6034 RECEIVED FEB 16 2001 WATER RESOURCES DEPT. SALEM, OREGON

Date started 1-17-01 Completed 1-17-01 (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 the best of my knowledge and belief. WWC Number 1238 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 1238 Signed [Signature] Date 1-22-01