BENT 55451

WELL I.D. LABEL# L 122822 STATE OF OREGON START CARD# 1032478 WATER SUPPLY WELL REPORT (as required by ORS 537.765 & OAR 690-205-0210) ORIGINAL LOG# (1) LAND OWNER Owner Well I.D. 5734 First Name Last Name (9) LOCATION OF WELL (legal description) Company Stahlbush Island Farms _ Twp 11 S N/S Range 4 Address 3122 Stahlbush Island Rd. __NE ___ 1/4 Tax Lot <u>300</u> ___ 1/4 of the <u>SW</u> City Corvallis Zip 97333 State OR Tax Map Number (2) TYPE OF WORK X New Well Deepening Conversion DMS or DD Lat Alteration (complete 2a & 10) Abandonment(complete 5a) DMS or DD (2a) PRE-ALTERATION Street address of well Nearest address Casing: 3400 NW Granger Ave. - Corvalls, OR 97330 Material From sacks/lbs Seal: (10) STATIC WATER LEVEL (3) DRILL METHOD Date Rotary Air Rotary Mud Cable Auger Cable Mud SWL(psi) Existing Well / Pre-Alteration Reverse Rotary Other Completed Well 10-18-2016 Domestic X Irrigation Flowing Artesian? (4) PROPOSED USE Community Industrial/ Commericial Livestock Dewatering Depth water was first found 37 WATER BEARING ZONES Thermal Injection Other SWL Date To Est Flow SWL(psi) + SWL(ft) (5) BORE HOLE CONSTRUCTION Special Standard (Attach copy 10-17-2016 37 58 300 35 Depth of Completed Well 100 10-18-2016 73 100 35 **BORE HOLE** SEAL sacks Dia From To Material To From Amt lbs 16 0 19 Cement 19 16 S 12 0 60 Calculated 15 8 60 100 Bentonite 14 (11) WELL LOG Calculated 14 Ground Elevation Xc \Box D How was seal placed: Method From To XOther Poured dry Topsoil 7 30 ft. Material. Brown clay Backfill placed from . _ ft. to _ Brown sandy clay 30 37 19 ft. to 37 ft. Material pea gravel Size 1/2 Filter pack from _ Small sand & gravel 37 40 Explosives used: Yes Type_ H Amount Ш Sand & gravel 40 50 50 Brown sand 58 (5a) ABANDONMENT USING UNHYDRATED BENTONITE 58 Gray clay 73 **Pounds Pounds** Proposed Amount Actual Amount Gray sand 73 83 (6) CASING/LINER Casing Liner 83 Blue clay 100 Gauge From To Plstc Wld Thrd X 8 1.5 250 lacksquare64.5 Hole naturally caved from 37' - 64.5' JONES DRILLING CO., INC. <u>29400 SANTIAM HWY</u> LEBANON, OR 97355 Shoe Inside Outside Other Location of shoe(s) Temp casing X Yes <u>541-367-2560 541-451-2686</u> Dia_12 From 0 1-800-915-8388 (7) PERFORATIONS/SCREENS Perforations Method Torch cut Screens Type Material Date Started 10-14-2016 Completed 10-18-2016 Perf/S Casing/ Screen # of Tele/ Scrn/slot Slot (unbonded) Water Well Constructor Certification Liner Dia slots creen width length pipe size Casing 25 64.5 .375 11 240 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 Date / 10-21-2016 (8) WELL TESTS: Minimum testing time is 1 hour Signed O Pump Flowing Artesian () Bailer Air (bonded) Water Well Constructor Certification Yield gal/min Drill stem/Pump depth Duration (hr) 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. °F Lab analysis ___Yes By Yes (describe below) TDS amount 129 License Number Water quality concerns? Date 10-21-2016 Units Amount Description

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version: 0.95

ORIGINAL - WATER RESOURCES DEPARTMENT

Signed

Contact Info (option