

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

CUAC
18181

OCT 23 1992

15/4/29
 24208

WATER RESOURCES DEPT.
 SALEM, OREGON

(START CARD) #

(1) OWNER: Well Number: _____
 Name Bushnell Farms
 Address 9880 SE Revenue Rd.
 City Export State OR Zip 97007

(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
 Thermal Injection Other _____

(5) BORE HOLE CONSTRUCTION:
 Special Construction approval Yes No Depth of Completed Well 490'
 Explosives used Yes No Type _____ Amount _____

HOLE		Material	SEAL		Amount sacks or pounds
Diameter	From To		From	To	
6"	195' 490'				

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"	195'	453'	270	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 5"	440'	495'		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of sheets) 453'

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

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
453'	495'	1/8"	385	5"	6"	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Yield gal/min 50 GPM Drawdown with 4 FT Drill stem at Draw Down Time hr.
after 2 HRS

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 NO
 Depth of strata: _____

(9) LOCATION OF WELL by legal description:
 County Clack Latitude _____ Longitude _____
 Township 1-S Nor S. Range 4-E E or W. WM. _____
 Section 29 1/4 _____ 1/4 _____
 Tax Lot 01100 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) 9880 SE Revenue Rd. Export Ore.

(10) STATIC WATER LEVEL:
243' ft. below land surface. Date 9/21/90
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found 465'

From	To	Estimated Flow Rate	SW
465'	490'	200 GPM	24'

(12) WELL LOG: Ground elevation 1200'

Material	From	To	SW
Cement Gravel	195'	276'	0
CLAY + GRAVEL	276'	360'	0
CLAY BLUE	360'	396'	0
Cement Gravel	396'	465'	0
SAND + GRAVEL 1005	465'	490'	24'
CLAY YELLOW	490'	495'	24'

RECEIVED

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 SALEM, OREGON

Date started 8/8/90 Completed 9/21/90

(unbonded) Water Well Constructor Certification:
 I certify that the work I performed on the construction, alteration abandonment of this well is in compliance with Oregon well construction standards. Materials used and information reported above are true to my 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 work performed during this time is in compliance with Oregon construction standards. This report is true to the best of my knowledge and belief.

Signed Brad Grant WWC Number 75
 Date 9/21/90