

SKYLES DRILLING, INC.

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 20100
 Skyles Drilling, Inc.
 1169 Molalla Ave.
 Oregon City, OR 97045
 656-2683

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 2s/1e/3/bc
 FEB 23 1995
 (START CARD) # 74710

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.

WATER RESOURCES DEPT.

(1) OWNER: Well Number 01

Name Beacon Homes
 Address 9500 SW 125th Ave.
 City Beaverton State Or. Zip 97005

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

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
10"	0	43	Gran Bent	43	0	14 sacks
6"	43	244				

4"x6" @ 140' Hole Plug 140 120 2 sacks

How was seal placed: Method A B C D E
 Other Poured in Dry

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"	+1	44 1/2	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 4"	5	244	160#	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) None used

(7) PERFORATIONS/SCREENS:

Perforations Method Saw
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
225	243	1/8x3	100			<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
23		240	1 hr.

Temperature of water 56.6° 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: _____

SALEM, OREGON
 (9) LOCATION OF WELL by legal description:
 County Clackamas Latitude _____ Longitude _____
 Township 2 South or S Range 1 East E or W. WM.
 Section 31 SW 1/4 NW 1/4
 Tax Lot 712 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) 6407 SW Wilhelm Rd. Tualatin, Or.

(10) STATIC WATER LEVEL:
125 ft. below land surface. Date 2-9-95
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found 100'

From	To	Estimated Flow Rate	SWL
100	128	Trace	?
165	186	3	125
218	239	20	125

(12) WELL LOG:
 Ground Elevation _____

Material	From	To	SWL
Soil Brown	0	6	
Clay Brown	6	12	
Basalt Brown Weathered	12	30	
Basalt Brown & Gray Soft	30	38	
Basalt Gray & Brown	38	128	
Basalt Gray	128	165	
Basalt Multicolored	165		
Porous		174	125
Basalt Gray & Brown	174		
Fractured		186	125
Basalt Gray	186	218	
Basalt Brown & Gray	218		
Porous		239	125
Basalt Gray	239	244	

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Date started 2-8-95 Completed 2-9-95

(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 Alan D. Renner WWC Number 1601 Date 2-10-95

(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 Steven C. Blend WWC Number 1592 Date 2-10-95