

(1) OWNER: Well No. L44582
Name PATTERSON NURSERY SALES
Address 14990 SE ORIENT DRIVE
City BORING St OR Zip 97009

(2) TYPE OF WORK: NEW WELL

(3) DRILL METHOD: ROTARY AIR

(4) PROPOSED USE: IRRIGATION

(5) BORE HOLE CONSTRUCTION:
Special Construction Approval NO _____ Depth of Compl. Well 280 ft
Explosives used NO _____ Type _____ Amount _____

HOLE			SEAL			
Diam.	From	To	Material	From	To	Amount
14	0	62	CEMENT	0	62	39 SACKS
12	62	195	CEMENT	175	195	42 SACKS
8	195	280				

Seal placement method C
Backfill: from _____ ft to _____ ft Material _____
Gravel: from _____ ft to _____ ft Size _____

(6) CASING/LINER:

	Diam.	From	To	Gauge	Material	Connection
Casing	10	+1	195	.250	STEEL	WELDED
	8	+2	210	.250	STEEL	WELDED
Liner						

Final Location of shoe(s) 195' 9 1/2" TUBEX

(7) PERFORATIONS/SCREENS:

Perf. Method _____
 Screens Type _____ Material _____

From	To	Slot Size	Number	Diam.	Tele/pipe Size	Casing/liner

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

Yield GPM	Draw-down	Drill stem at	Time
80		280	1 hr.
80		280	2 hr

Temperature of water 54F Depth Artesian Flow Found _____
Was water analysis done? NO By whom _____
Reason for water not suitable for use _____
Depth of strata _____

(9) LOCATION OF WELL by legal description:
County CLACK Lat. ° ' " Long. ° ' "
Township 2 S Range 4 E WM.
Section 31 NW 1/4 SE 1/4
Tax Lot 3900 Lot Block Subdivision
Street Address of Well (or nearest Address)
29105 SE WEITZ ROAD EAGLE CREEK, OR 97022

(10) STATIC WATER LEVEL:
122 ft. below land surface. Date 1/25/01
Artesian pressure _____ lb per square in. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 20

From	To	Est Flow Rate	SWL
20	54	20+ GPM	18
240	260	80+ GPM	122

(12) WELL LOG:

Material	Ground elevation _____		SWL
	From	To	
TOP SOIL	0	2	
SOIL & CLAY	2	4	
BROWN CLAY	4	10	
GRAVEL, BOULDERS & SAND	10	54	18
BLUE CLAY	54	90	
GRAY SAND & CLAY	90	111	
BLUE CLAY	111	146	
GRAY CLAY	146	192	
BLUE CLAY	192	240	
BLUE CLAY WITH SEAMS OF COARSE CEMENTED SAND	240	260	122
BLUE CLAY	260	280	

RECEIVED

FEB 01 2001

WATER RESOURCES DEPT.
SALEM, OREGON

Date started 1/10/01 Completed 1/25/01

(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 my best 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. 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 *Tea W. Williams* WWC Number 616
Date 1/25/01