

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

SKYLES DRILLING, INC.

START CARD # W152402

(1) OWNER:

Well Number: 02

Name Dan Harmon / Precision Construction Co.

Address 8025 NE Killingsworth

City Portland State OR Zip 97218

(2) TYPE OF WORK:

X New Well Deepening Alteration (repair/recondition) Abandonment

(3) DRILL METHOD:

X Rotary Air Rotary Mud Cable Auger Other

(4) PROPOSED USE:

X Domestic Community Industrial Irrigation Thermal Injection Livestock Other

(5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes No Depth of Completed Well 672 ft. Explosives used Yes No Type Amount

Table with columns: HOLE Diameter, From, To, SEAL Material, From, To, Amount sacks or pounds. Rows include Bentonite, Cement & Bentonite, and Cement.

How was seal placed: Method A B C D E

X Other Pumped @ Bottom / Poured Bentonite

Backfill placed from ft. to ft. Material

Gravel placed from ft. to ft. Size of gravel

(6) CASING/LINER:

Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Rows for Casing and Liner.

Drive Shoe used Inside Outside None

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

X Perforations Method Saw

Screens Type

OCT 25 2002

WATER RESOURCES DEPARTMENT SALEM, OREGON

Table with columns: From, To, Slot size, Number, Diameter, Tela/pipe size, Casing, Liner. Row for slot size 1/8x3, number 80.

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

Pump Bailer Air Flowing Artesian

Table with columns: Yield gal/min, Drawdown, Drill stem at, Time. Values: 25, 668, 1 hr.

Temperature of Water 58 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 Clackamas Latitude Longitude Township 2S N or S. Range 1E E or W. of WM. Section 23 NW 1/4 SW 1/4 Tax lot 900 Lot Block Subdivision Street Address of Well (or nearest address) 930 Rosemont Rd., West Linn, OR

(10) STATIC WATER LEVEL:

571 ft. below land surface. Date 10/22/2002 Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES:

Depth at which water was first found 75'

Table with columns: From, To, Estimated Flow Rate, SWL. Rows for 75-105 and 634-661.

(12) WELL LOG:

Ground elevation

Table with columns: Material, From, To, SWL. Lists various geological layers like Clay, Basalt, and Cement.

Date started 10/9/2002 Completed 10/22/2002

(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.

Signed

WWC Number 1715

Date 10-22-02

(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.

Signed

WWC Number 1592

Date 10-22-02

WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

SKYLES DRILLING, INC.

START CARD # W152402

Instructions for completing this report are on the last page of this form

Page 2

(1) OWNER: Well Number: **02**

Name **Dan Harmon / Precision Construction Co.**

Address **8025 NE Killingsworth**

City **Portland** State **OR** Zip **97218**

(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 \_\_\_\_\_ ft.

Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Amount
Diameter	From	To	Material	From	To	

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:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used  Inside  Outside  None

Final location of shoe(s) \_\_\_\_\_

(7) PERFORATIONS/SCREENS:

Perforations Method \_\_\_\_\_

Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>

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

Pump  Bailer  Air  Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time

Temperature of Water \_\_\_\_\_ 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 **Clackamas** Latitude \_\_\_\_\_ Longitude \_\_\_\_\_

Township **2S** N or S. Range **1E** E or W. of WM.

Section **23** Lot **NW** 1/4 **SW** 1/4

Tax lot **900** Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_

Street Address of Well (or nearest address) **930 Rosemont Rd., West Linn, OR**

(10) STATIC WATER LEVEL:

\_\_\_\_\_ ft. below land surface. Date \_\_\_\_\_

Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found \_\_\_\_\_

From	To	Estimated Flow Rate	SWL

(12) WELL LOG:

Ground elevation \_\_\_\_\_

Material	From	To	SWL
Basalt, Multi-Grays, Fractured at Times	504	517	
Basalt, Gray, Fractured	517	556	
Basalt, Gray w/ Green Fractures	556	573	
Basalt, Gray, Fractured	573	634	
Basalt, Gray w/ White Fractures & Porous	634	661	571
Basalt, Gray, Semi-Fractured	661	672	

SKYLES DRILLING INC.  
1169 Molalla Avenue  
Oregon City, OR 97045  
(503)656-2683

**RECEIVED**  
OCT 25 2002  
WATER RESOURCES DEPT  
SALEM, OREGON

Date started **10/9/2002** Completed **10/22/2002**

(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 \_\_\_\_\_ WWC Number **1715**  
Date **10-22-02**

(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. Bland** WWC Number **1592**  
Date **10-22-02**