

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

RECEIVED 61068

MAY 05 2005

61068

WELL I.D. # L 76023
START CARD # 166093

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

(1) LAND OWNER Well Number _____
Name Dell & Debbie Furdek
Address 21794 S McKENZIE AVE
City OREGON CITY State OR Zip 97055

(2) TYPE OF WORK New Well
 Deepening Alteration (repair/recondition) Abandonment Conversion

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable Auger Cable Mud
 Other _____

(4) PROPOSED USE
 Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other _____

(5) BORE HOLE CONSTRUCTION Special Construction: Yes No
Depth of Completed Well 345 ft.
Explosives used: Yes No Type _____ Amount _____

| BORE HOLE | | | SEAL | | | |
|-----------|------|-----|-----------|------|-----|-----------------|
| Diameter | From | To | Material | From | To | Sacks or Pounds |
| 1 1/2" | 0 | 25 | Cement | 20 | 250 | 33 sacks of F99 |
| 8" | 25 | 265 | Bentonite | 0 | 20 | 15 sacks |
| 7 5/8" | 265 | 345 | | | | |

How was seal placed: Method A B C D E
 Other Poured
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" | +2 | 300 | 250 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Liner: 4" | 205 | 325 | 160 | <input type="checkbox"/> | <input checked="" 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 PVC Material _____

| From | To | Slot Size | Number | Diameter | Tele/pipe size | Casing | Liner |
|------|-----|-----------|--------|----------|----------------|--------|-------|
| 325 | 345 | 10 slot | | 4" | 20 | SCREEN | |

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

| Yield gal/min | Drawdown | Drill stem at | Time |
|---------------|----------|---------------|-------|
| 75+ | | 344 | 1 hr. |

Temperature of water 57 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 (legal description)
County CLATSOP
Tax Lot 1500 Lot _____
Township 2 N or S Range 3 E or W WM
Section 10 NE 1/4 NE 1/4
Lat N 88° 35' 57" W (degrees or decimal)
Long _____ (degrees or decimal)
Street Address of Well (or nearest address) 21794 S McKENZIE OREGON CITY OR 97023

(10) STATIC WATER LEVEL
128 ft. below land surface. Date 4-17-05
_____ 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 |
|------|-----|---------------------|-----|
| 40 | 45 | 20 sealed OFF | 35 |
| 305 | 345 | 75+ | 128 |

(12) WELL LOG Ground Elevation _____

| Material | From | To | SWL |
|--------------------------|------|-----|-----|
| TOP SOIL | 0 | 2 | |
| Clay Brown | 2 | 10 | |
| Rebar S | 10 | 12 | |
| Clay Blue | 12 | 25 | |
| Clay Gray | 25 | 40 | |
| Sand Black | 40 | 45 | 35 |
| Clay Gray | 45 | 90 | |
| Clay Blue | 90 | 155 | |
| Clay Gray | 155 | 240 | |
| Clay Blue | 240 | 305 | |
| Sand Stone multi colored | 305 | 315 | 128 |
| Sand multi colored | 315 | 345 | 128 |

Date Started 4-14-05 Completed 4-19-05

(unbonded) Water Well Constructor Certification
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.

WWC Number 1512 Date 4-30-05
Signed Thom Youngberg

(bonded) Water Well Constructor Certification
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.

WWC Number 257 Date 4-30-05
Signed W. O. Youngberg

JUN 01 2005

WATER RESOURCES DEPT
SALEM, OREGON