

STATE OF OREGON
 WATER SUPPLY WELL REPORT
 (as required by ORS 537 765)

WELL ID. # 98102
 START CARD # 199260

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

(1) LAND OWNER Well Number L98102
 Name George & Susan Hansen
 Address 30576 South Oswalt Road
 City Colton State OR Zip 97017

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

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
12	0	75	Cement	0	75	44 Sacks
10	75	320				

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: 8	1	120	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 6	-3	320	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
 Final location of shoe(s) 320'

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

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
280	320	1/8 x 2	400	6		<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
80		320	1 hr.

Temperature of water 54F Depth Artesian Flow Found _____
 Pump Bailer Air Flowing Artesian
 When water analysis done? Yes By whom _____
 No Reason water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____

(9) LOCATION OF WELL by legal description:
 County Clack Latitude _____ Longitude _____
 Township 5S N or S Range 3E E or W. WM.
 Section 4 1/4 NW 1/4 SW
 Tax Lot 04702 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) 30576 South Oswalt Rd Colton OR 97017

(10) STATIC WATER LEVEL:
33 ft. below land surface. Date 3/17/09
 Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found 8'

From	To	Estimated Flow Rate	SWL
8'	12'	9 GPM	8
280'	320'	80 GPM	33

(12) WELL LOG:
 Ground Elevation _____

Material	From	To	SWL
Top Soil	0	1.5	
Brown Clay	1.5	8	
Med. Large Boulders	8	12	8
Gray Claystone w/ fingers of purple clay	12	17	
Blue Claystone	17	32	
Grayish Blue Clay	32	56	
Med. Hard Gray Basalts	56	240	
Brow. Gray Clay with gravel	240	320	33

Olsen-Pulliam Well Drlg
 PO Box 505
 Gresham Or 97030
 503-665-3353

Date started 2/23/09 Completed 3/17/09

(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 _____ 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 Vance Wagner WWC Number 1738 Date 3/26/09

RECEIVED

MAR 31 2009