STATE OF OREGON WATER SUPPLY WELL REPORT (as required by ORS 537.765 & OAR 690-205-0210) CLAC 66593

01-20-2010

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 WELL LABEL # L
 102257

 START CARD #
 1009041

(1) LAND OWNER Owner Well I.D.	(9) LOCATION OF WELL (legal description)
First Name Last Name	County <u>Clackamas</u> Twp <u>3.00</u> <u>S</u> N/S Range <u>4.00 E</u> E/W WM
Company EAGLE FERN CAMP	Sec <u>14</u> <u>SE</u> 1/4 of the <u>SE</u> 1/4 Tax Lot <u>2501</u>
Address 37700 SE CAMP RD	
City ESTACADA State OR Zip 97023	Tax Map Number Lot Lat `' " or DMS or DD
	Long ' or DMS or DD
(2) TYPE OF WORK New Well Deepening Conversion	Street address of well Nearest address
Alteration (repair/recondition)	
(3) DRILL METHOD	37700 SE CAMP RD
Rotary Air Rotary Mud Cable Auger Cable Mud	
Reverse Rotary Other	(10) STATIC WATER LEVEL Date SWL(psi) + SWL(ft)
	Existing Well / Predeepening
(4) PROPOSED USE Domestic Irrigation Community	Completed Well 01-04-2010 121
Industrial/Commercial Livestock Dewatering	Flowing Artesian? Dry Hole?
Thermal Injection Other	WATER BEARING ZONES Depth water was first found 435
(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)	SWL Date From To Est Flow SWL(psi) + SWL(ft)
Depth of Completed Well <u>503.00</u> ft.	01-04-2010 435 503 75 121
BORE HOLE SEAL sacks/	
Dia From To Material From To Amt Ibs	
10 0 83 Bentonite Chips 0 22 17 S 8 83 422 Cement 22 422 4.512 P	
8 83 422 Cement 22 422 4,512 P 5.5 422 503	
	(11) WELL LOG Ground Elevation
How was seal placed: Method A B C D E	Material From To
Other	TOP SOIL 0 1
Backfill placed from ft. to ft. Material	BROWN CLAY W/ COBBLES 1 30
Filter pack from ft. to ft. Material Size	FRACTURED ROCK W/ BRWN CLAY LAYERS 30 130 RED CLAY 130 190
Explosives used: Yes Type Amount	
	BROWN CLAY CONGLOMERATE190295BLUE CLAY295390
(6) CASING/LINER Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd	BLACK BASALT 390 503
$\bigcirc \bigcirc $	
$\bigcirc \bigcirc $	
Shoe Inside Outside Other Location of shoe(s) $_{422}$	
Temp casing Yes Dia 8 From 1 To $\underline{60}$	
(7) PERFORATIONS/SCREENS	
Perforations Method	
Screens Type CERTALOK Material PVC	
Perf/S Casing/ Screen Scrn/slot Slot # of Tele/ creen Liner Dia From To width length slots pipe size	Date Started <u>12-14-2009</u> Completed <u>01-04-2010</u>
Screen Liner 4 483 503 10	(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.
(8) WELL TESTS: Minimum testing time is 1 hour	License Number <u>1512</u> Date <u>01-20-2010</u>
Pump Bailer Air Flowing Artesian	Electronically Filed
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	Signed <u>THOMAS YOUNGBERG (E-filed)</u>
75 500 2	(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
Temperature 56 °F Lab analysis Yes By	performed during this time is in compliance with Oregon water supply well
Temperature 56 °F Lab analysis Yes By Water quality concerns? Yes (describe below)	construction standards. This report is true to the best of my knowledge and belief.
From To Description Amount Units	License Number <u>1771</u> Date <u>01-20-2010</u>
	Electronically Filed
	Signed <u>GEORGE YOUNGBERG (E-filed)</u>
	Contact Info (optional) YOUNGBERG PUMP & DRILLING PH. 503-630-3970

Form Version: 0.95

ORIGINAL - WATER RESOURCES DEPARTMENT

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK