

(1) OWNER: Well Number: **02**
 Name **John Griffin**
 Address **10101 SE Main St., Suite 2001**
 City **Portland** State **OR** Zip **97216**

(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 **280** ft.
 Explosives used Yes No Type Amount

HOLE		SEAL		Amount	
Diameter	From To	Material	From To	sacks or pounds	
10	0 34	Bentonite	34	0	25 Sacks
6	34 280				

How was seal placed: Method A B C D E
 Other **Poured bentonite**
 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	+2 279	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: None			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

 Drive Shoe used Inside Outside None
 Final location of shoe(s) **279'**

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

From To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
None					<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
42		278	1 hr.

Temperature of Water **61** Depth Artesian Flow _____
 Was a water analysis done? Yes No 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 **2SOUTH** N or S. Range **3EAST** E or W. of WM.
 Section **02D** NE 1/4 **SE** 1/4
 Tax lot **100** Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) **26075 SE Hwy 212, Damascus, OR**

(10) STATIC WATER LEVEL:
208 ft. below land surface. Date **2/16/2012**
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found **4'**

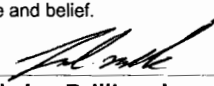
From	To	Estimated Flow Rate	SWL
4	5	2	4
241	252	10	208
260	280	42	208

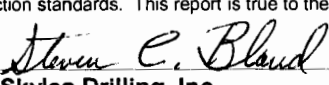
(12) WELL LOG:
 Ground elevation _____

Material	From	To	SWL
Top soil, brown w/gravels	0	4	
Clay, brown	4	15	
Conglomerate, tight	15	34	
Gravels & sand, multicolored cemented	34	45	
Sand, multicolored cemented	45	59	
Conglomerate w/gravels, loose	59	75	
Gravels, medium cemented	75	124	
Sand, brown cemented	124	135	
Gravels & sand, cemented	135	149	
Sand, brown cemented	149	161	
Gravels & sand, mc coarse	161	169	
Clay, sandy w/sandstone, tan	169	174	
Sand, coarse w/pea gravel, mc	174	197	
Sand, cemented w/seams of sand, black	197	234	
Claystone w/sand, brown cemented	234	237	
Sand, brown cemented	237	241	
Sand, fine w/mica, brown	241	252	
Sand, brown cemented	252	260	
Gravels, large to small	260	280	208

Recommend pump set 10' off bottom

Date started **2/1/2012** Completed **2/15/2012**

(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 **1884**
 Date **2/17/2012**

(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  WWC Number **1592**
 Date **2/17/2012**