

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

WELL I.D. LABEL# L 30192
START CARD # 1037026
ORIGINAL LOG #

11/5/2017

(1) LAND OWNER
Owner Well I.D.
First Name Last Name
Company KARAM NURSERY
Address 15028 S. REDLAND RD
City OREGON CITY State OR Zip 97045

(2) TYPE OF WORK
New Well Deepening Conversion
[X] Alteration (complete 2a & 10) Abandonment (complete 5a)

(2a) PRE-ALTERATION
Casing: Dia + From To Gauge Stl Plstc Wld Thrd
Material From To Amt sacks/lbs
Seal: Cement w/2% Bentonite 0 58 28 Sacks

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

(4) PROPOSED USE
Domestic Irrigation Community
Industrial/ Commercial Livestock Dewatering
Thermal Injection Other

(5) BORE HOLE CONSTRUCTION
Special Standard (Attach copy)
Depth of Completed Well 220.00 ft.

Table with columns: Dia, From, To, Material, SEAL, Amt, lbs. Includes rows for BORE HOLE and SEAL.

How was seal placed: Method A B C D E
Backfill placed from ft. to ft. Material
Filter pack from ft. to ft. Material Size
Explosives used: Yes Type Amount

(5a) ABANDONMENT USING UNHYDRATED BENTONITE
Proposed Amount Actual Amount

(6) CASING/LINER
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd
Shoe Inside Outside Other Location of shoe(s)
Temp casing Yes Dia From + To

(7) PERFORATIONS/SCREENS
Screens Type certalok Material pvc
Perf/ Casing/ Screen Screen/ slot Slot # of Tele/
Screen Liner Dia From To width length slots pipe size

(8) WELL TESTS: Minimum testing time is 1 hour
Pump Bailer Air Flowing Artesian
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)
Temperature 53 F Lab analysis Yes By
Water quality concerns? Yes (describe below) TDS amount 66 ppm
From To Description Amount Units

(9) LOCATION OF WELL (legal description)
County CLACKAMAS Twp 2.00 S N/S Range 2.00 E E/W WM
Sec 34 SW 1/4 of the NW 1/4 Tax Lot 900
Tax Map Number Lot
Lat " or " DMS or DD
Long " or " DMS or DD
Street address of well Nearest address
15028S. REDLAND RD

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Pre-Alteration
Completed Well
Flowing Artesian? Dry Hole?
WATER BEARING ZONES Depth water was first found
SWL Date From To Est Flow SWL(psi) + SWL(ft)

(11) WELL LOG
Ground Elevation
Material From To
removed existing pvc liner 0 148
installed new liner & screen 148 220
RECEIVED
JAN 23 2018
OWRD

Date Started 8/25/2017 Completed 8/25/2017

(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.
License Number Date
Signed

(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.
License Number 1771 Date 11/5/2017
Signed GEORGE YOUNGBERG (E-filed)
Contact Info (optional)