

(1) **LAND OWNER** Owner Well I.D. **MOLALLA, OR 97038**
 First Name _____ Last Name _____
 Company Columbia Fruit LLC
 Address 2526 Dike Rd
 City Woodland State WA Zip 98674

(9) **LOCATION OF WELL (legal description)**
 County CLACKAMAS Twp 5 S N/S Range 1 E E/W WM
 Sec 19 NE 1/4 of the NW 1/4 Tax Lot 1100
 Tax Map Number _____ Lot _____
 Lat _____ ' _____ " or _____ DMS or DD
 Long _____ ' _____ " or _____ DMS or DD
 Street address of well Nearest address

(2) **TYPE OF WORK** New Well Deepening Conversion
 Alteration (complete 2a & 10) Recondition (Complete 5a)

(2a) **PRE-ALTERATION**
 Dia + From To Gauge Stl Plstc Wld Thrd
 Casing: _____
 Material From To Amt sacks/lbs
 Seal: _____

S. Newman Rd. 1/8 mile west of Barlow Rd

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

(10) **STATIC WATER LEVEL**
 Date SWL(psi) + SWL(ft)
 Existing Well / Pre-Alteration _____
 Completed Well 09-14-2018 _____
 Flowing Artesian? Dry Hole?

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

WATER BEARING ZONES Depth water was first found 38
 SWL Date From To Est Flow SWL(psi) + SWL(ft)

(5) **BORE HOLE CONSTRUCTION** Special Standard (Attach copy)
 Depth of Completed Well 300 ft.

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
	38	62			
	69	91			
09-14-2018	166	293			52

BORE HOLE SEAL sacks/lbs

Dia	From	To	Material	From	To	Amt	lbs
20	0	24	Bentonite	0	4	6	S
16	0	70	<i>see note @ end</i>	Calculated		4.7	
12	70	313	Cement	4	70	169	S
6	313	480		Calculated		32	

How was seal placed: Method A B C D E
 Other bent. placed dry
 Backfill placed from 300 ft. to 315 ft. Material pea gravel
 Filter pack from 120 ft. to 300 ft. Material c.s.s. Size 6/9
 Explosives used: Yes Type _____ Amount _____

(11) **WELL LOG** Ground Elevation _____

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

Material	From	To
top soil	0	1
silt clay brown	1	14
silty sandy clay	14	19
clay grey	19	29
clay brown with sand & small gravel	29	38
brown sand & gravel with brown clay	38	62
clay brown	62	64
clay grey	64	69
sand & gravel grey med	69	91
clay grey	91	98
clay green dansy	98	102
clay blue sticky	102	136
clay olive green silty	136	143
clay grey crumbly & sandy	143	166
crumbly clay with layers of cemented sand	166	174
clay blue sticky	174	191
clay brown	191	206
clay brown with sand lenses	206	218
clay grey	218	242

(6) **CASING/LINER**
 Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd
 Shoe Inside Outside Other Location of shoe(s) 310
 Temp casing Yes Dia 20 From + 0 To 22

Date Started 09-11-2018 Completed 10-14-2018

(7) **PERFORATIONS/SCREENS** Perforations Method _____
 Screens Type v wire Material s.s.

(unbonded) **Water Well Constructor Certification**

Perf/S	Casing/Screen	Scrn/slot	Slot	# of	Tele/
green	Liner	width	length	slots	pipe size
Screen	8	160	175	.06	8
Screen	8	206	220	.06	8
Screen	8	240	248	.06	8
Screen	8	263	275	.06	8
Screen	8	288	294	.06	8

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**
 Pump Bailer Air Flowing Artesian

License Number _____ Date _____
 Signed _____

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
150	102		4

(bonded) **Water Well Constructor Certification**

Temperature 56 °F Lab analysis Yes By _____
 Water quality concerns? Yes (describe below) TDS amount 138
 From To Description Amount Units

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 688 Date 10-15-2018
 Signed Steven N. Stadel
 Contact Info (optional) _____

(2a) PRE-ALTERATION

MOLALLA, OR 97038

Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd

Material	From	To	Amt	sacks/lbs

(5) BORE HOLE CONSTRUCTION

BORE HOLE			SEAL			Amt	sacks/lbs
Dia	From	To	Material	From	To		
			Cement	315	475	32	S
					Calculated	28	
					Calculated		
					Calculated		
					Calculated		

FILTER PACK

From	To	Material	Size

(6) CASING/LINER

Casing Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
	8		248	263	.250				
	8		275	288	.250				
	8		294	300	.250				

(7) PERFORATIONS/SCREENS

Perf/Sreen	Casing/Screen Liner	Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/pipe size
Screen								

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

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)

Water Quality Concerns

From	To	Description	Amount	Units

(10) STATIC WATER LEVEL

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)

(11) WELL LOG

Material	From	To
dark grey claystone & sand	242	248
clay grey	248	252
clay brown	252	264
clay dark brown with thin lenses of cemented sand	264	274
clay grey brown	274	289
sand fine grey	289	293
clay blue green	293	321
soft green sandstone	321	324
clay grey	324	359
clay green	359	414
clay grey with fine grey sand lenses with wood	414	426
clay blue green sticky	426	475
clay blue	475	480
hole caved from 475-480		
8" drive shoe welded on top of 8" riser pipe @ 120'		
bottom plate welded on tail pipe		
12" drive shoe cutt off @ 310'		
*cement outside 16" casing 4'-24'		
*cement outside 12" casing from 47'-70'		

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Comments/Remarks

WATER SUPPLY WELL REPORT

WESTERBERG DRILLING INC.

START CARD # 214206

(as required by ORS 537.765 & OAR 690-205-0210)

PO BOX 1228

ORIGINAL LOG #

(1) LAND OWNER Owner Well I.D. MOLALLA, OR 97038

First Name Last Name

Company Columbia Fruit LLC

Address 2526 Dike Rd

City Woodland State WA Zip 98674

(2) TYPE OF WORK [X] New Well [] Deepening [] Conversion

(2a) PRE-ALTERATION

Casing: Dia + From To Gauge Stl Plstc Wld Thrd

Material From To Amt sacks/lbs

(3) DRILL METHOD

[] Rotary Air [] Rotary Mud [X] Cable [] Auger [] Cable Mud

(4) PROPOSED USE

[] Domestic [X] Irrigation [] Community [] Industrial/ Commercial [] Livestock [] Dewatering [] Thermal [] Injection [] Other

(5) BORE HOLE CONSTRUCTION

Depth of Completed Well 300 ft. Special Standard [] (Attach copy)

BORE HOLE

Table with columns: Dia, From, To, Material, SEAL, Amt, lbs. Rows include Bentonite and Cement.

How was seal placed: Method [] A [] B [X] C [] D [] E

[X] Other bent. placed dry

Backfill placed from 300 ft. to 315 ft. Material pea gravel

Filter pack from 120 ft. to 300 ft. Material c.s.s. Size 6/9

Explosives used: [] Yes Type Amount

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount Pounds Actual Amount Pounds

(6) CASING/LINER

Table with columns: Casing, Liner, Dia, From, To, Gauge, Stl, Plstc, Wld, Thrd. Includes material and seal details.

Shoe [] Inside [X] Outside [] Other Location of shoe(s) 310

Temp casing [X] Yes Dia 20 From + 0 To 22

(7) PERFORATIONS/SCREENS

Perforations Method

Screens Type v wire Material s.s.

Table with columns: Perf/S, Casing/Screen, Dia, From, To, Scrn/slot width, Slot length, # of slots, Tele/pipe size.

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

[X] Pump [] Bailer [] Air [] Flowing Artesian

Table with columns: Yield gal/min, Drawdown, Drill stem/Pump depth, Duration (hr). Row 1: 150, 102, 4.

Temperature 56 °F Lab analysis [] Yes By

Water quality concerns? [] Yes (describe below) TDS amount 138

Table with columns: From, Description, Amount, Units. Includes 'RECEIVED' stamp and date 'NOV 13 2018'.

(9) LOCATION OF WELL (legal description)

County CLACKAMAS Twp 5 S N/S Range 1 E E/W WM

Sec 19 NE 1/4 of the NW 1/4 Tax Lot 1100

Tax Map Number Lot

Lat " or DMS or DD

Long " or DMS or DD

[] Street address of well [X] Nearest address

S. Newman Rd. 1/8 mile west of Barlow Rd

(10) STATIC WATER LEVEL

Table with columns: Existing Well / Pre-Alteration, Date, SWL(psi), SWL(ft). Row 1: Completed Well, 09-14-2018, 52.

Flowing Artesian? [] Dry Hole? []

WATER BEARING ZONES

Depth water was first found 38

Table with columns: SWL Date, From, To, Est Flow, SWL(psi), SWL(ft). Row 1: 09-14-2018, 166, 293, 52.

(11) WELL LOG

Ground Elevation

Table with columns: Material, From, To. Lists soil layers like top soil, silt clay brown, etc.

Date Started 09-11-2018 Completed 10-14-2018

(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.

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.

License Number 688 Date 10-15-2018

Signed

Contact Info (optional)

a) PRE-ALTERATION

Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
Material		From	To	Amt		sacks/lbs		

MOLALLA, OR 97038

Water Quality Concerns

From	To	Description	Amount	Units

(5) BORE HOLE CONSTRUCTION

BORE HOLE			SEAL				
Dia	From	To	Material	From	To	Amt	sacks/lbs
			Cement	315	475	32	S
					Calculated	28	
					Calculated		
					Calculated		
					Calculated		

(10) STATIC WATER LEVEL

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)

FILTER PACK

From	To	Material	Size

(6) CASING/LINER

Casing Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
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clay grey with fine grey sand lenses with wood	414	426
clay blue green sticky	426	475
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hole caved from 475-480		
8" drive shoe welded on top of 8" riser pipe @ 120'		
bottom plate welded on tail pipe		
12" drive shoe cutt off @ 310'		

(7) PERFORATIONS/SCREENS

Perf/S creen	Casing/ Liner	Screen Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ pipe size
Screen								

*cement outside 16" casing 4'-24' /
*cement outside 12" casing from 47'-70' /

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

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)

Comments/Remarks

Oregon Water Resources Department
PUMP TEST FORM COVER SHEET

Well Owner:

Name: Columbia Fruit LLC
 Address: 2526 Dike Rd
 County: Cowlitz
 City: Woodland State: WA Zip: _____
 Original owner (from well log): _____

Well Location:

Township: 5 S Range: 1 E
 Section: 19 $\frac{1}{4}$: NE $\frac{1}{16}$: NE $\frac{1}{64}$: NE
 Well depth: 300.0 Date drilled: 9/14/18
 Owners well no. (if any): _____
 POD ID: _____

Water Right Information:

Application: T-12446 Permit: _____ Certificate: _____
 Is this well listed on more than one water right? Yes If yes, list additional water rights below:
 Application: _____ Permit: _____ Certificate: _____
 Application: _____ Permit: _____ Certificate: _____

Pump Test:

Test Conducted by: Steve Stadel Well Owner? Yes
 Company: Westerberg Drilling Inc
 Address: PO Box 1228 Date of Test: 08/16/2018
 City: Molalla State: OR Zip: 97038
 Daytime phone: 503-829-2526

Method of discharge measurement (see our brochure for more information): Flow meter
 Method of water-level measurement (pick one or enter other method used): Electric tape
 Length of air line (if used): n/a

Pump type (pick one or enter other method used): Submersible
 Was the pump test conducted during normal use of the well? Yes Note: new well test

Are you aware of any wells, other than domestic or stock wells, pumping within 1000 feet of the tested well during the test or within 24 hours prior to the test? Yes Note: no
 If yes, give approximate distances to each and approximate pumping rate of each. If possible, indicate if they were turned on or off during the test: _____

Is there a lake, stream or other surface water body within $\frac{1}{4}$ mile of the tested well? Yes If yes, give approximate distance from the well and approximate elevation difference between the surface water and the well head. Approx. distance: _____ ft Approx. elevation difference: _____ ft

Well elevation is n/a surface water body.

Description of measuring point (e.g. top port of 1 inch port pipe, west side) _____

3/4" pvc probe tube
 Measuring point distance above land surface 2.00 feet.

Static water level measurements: (A minimum of three measurements are required in the hour before pumping begins at no less than 20 minutes apart):

Time	Depth to water below meas. point	Depth to water below land surface
<u>11:00 am</u>	<u>54.00</u>	<u>52.00</u>
<u>11:20 am</u>	<u>54.00</u>	<u>52.00</u>
<u>11:40 am</u>	<u>54.00</u>	<u>52.00</u>

Discharge measurements: (A discharge measurement is required at the start of pumping and at least once an hour during the test; additional measurements should be noted on the Pump Test Data Sheet):

Time	Discharge Rate	Discharge Units (e.g. gpm, cfs, etc)
<u>12:00 pm</u>	<u>150.00</u>	<u>gpm (gallons per minute)</u>
<u>1:00 pm</u>	<u>150.00</u>	<u>gpm (gallons per minute)</u>
<u>2:00 pm</u>	<u>150.00</u>	<u>gpm (gallons per minute)</u>
<u>3:00 pm</u>	<u>150.00</u>	<u>gpm (gallons per minute)</u>
<u>4:00 pm</u>	<u>150.00</u>	<u>gpm (gallons per minute)</u>

Time pump turned on: _____ Date 08/16/2018 Time 12:00 pm
 Time pump turned off: _____ Date 08/16/2018 Time 4:00 pm
 Total pumping time: 4 hours 0 minutes

Note: Well must be idle for at least 16 hours prior to the test.
 Additional forms can be obtained from our web site at: <http://www.wrd.state.or.us>

Required Signature: [Signature]

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