

(1) LAND OWNER Owner Well I.D. _____
 First Name JOHN Last Name CHILDS
 Company _____
 Address 10400 SE 282ND AVE.
 City BORING State OR Zip 97009

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

(2a) PRE-ALTERATION
 Dia + From To Gauge Stl Plstc Wld Thrd
 Casing:

Material	From	To	Amt	sacks/lbs				

 Seal: _____

(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 453.00 ft.
BORE HOLE

Dia	From	To	Material	From	To	Amt	sacks/lbs
14	0	40	Bentonite Chips	0	20	22	S
12	40	173			Calculated	20.7	
10	173	442	Cement with 5% Bento	20	173	7600	P
8	442	453			Calculated	3749.02	

How was seal placed: Method A B C D E
 Other POURED & HYDRATED
 Backfill placed from 173 ft. to 380 ft. Material CEMENT
 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
<input checked="" type="checkbox"/>	<input type="checkbox"/>	8	<input type="checkbox"/>	2	442	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	6	<input type="checkbox"/>	13	373	200	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

 Shoe Inside Outside Other Location of shoe(s) _____
 Temp casing Yes Dia _____ From _____ + _____ To _____

(7) PERFORATIONS/SCREENS
 Perforations Method PUSHDOWN PERF
 Screens Type JOHNSON SCREEN Material PVC

Perf/ Screen	Casing/ Liner	Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ pipe size
Perf	Casing	8	380	440	.25	1	1800	
Screen	Liner	6	373	453	.32			

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
180		453	2

 Temperature 55 °F Lab analysis Yes By _____
 Water quality concerns? Yes (describe below) TDS amount 92 ppm

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)
 County CLACKAMAS Twp 3.00 S N/S Range 2.00 E E/W WM
 Sec 27 NE 1/4 of the SW 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
15357 S.KIRK RD

(10) STATIC WATER LEVEL

Existing Well / Pre-Alteration	Date	SWL(psi)	+	SWL(ft)
Completed Well	12/5/2019			222

 Flowing Artesian? Dry Hole?
 WATER BEARING ZONES Depth water was first found 360.00

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
12/5/2019	380	439	180			222

(11) WELL LOG Ground Elevation _____

Material	From	To
TOP SOIL	0	1
REDDISH BROWN GRITTY CLAY	1	40
MULTI-COLORED ROCK MED/HARD	40	53
GREY BASALT HARD	53	71
MULTI-COLORED ROCK MED	71	108
M/C ROCK W/BROWN CLAY SEAMS	108	147
BROWN SANDSTONE FINE	147	168
GREY SANDSTONE W/GREY CLAY SEAMS	168	201
BROWN SANDSTONE W/SMALL GRAVEL	201	214
GREYISH BLUE CLAYSTONE W/SAND SEAMS	214	268
BLACK MED COARSE SANDSTONE	268	289
" " W FINE BROWN SILTY CLAY SEAMS	289	315
GREY CLAYSTONE W SANDSTONE SEAMS	315	352
BLUE & GREY CLAYSTONE W SANDSTONE SE	352	380
MULTI COLORED SANDSTONE MED COARSE	380	402
BLUE CLAYSTONE W SANDSTONE SEAMS	402	428
FINE TO MED SANDSTONE W PUMICE & WOO	428	439
GREY & BLUE CLAYSTONE	439	453

Date Started 11/14/2019 Completed 12/5/2019
(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 1/1/2020
 Signed GEORGE YOUNGBERG (E-filed)
 Contact Info (optional) YOUNGBERG PUMP & WELL DRILLING PH 503-630-