

STATE OF OREGON
WATER SUPPLY WELL REPORT

CLAC 76948

WELL I.D. LABEL# L

143578

START CARD #

1054524

ORIGINAL LOG #

(as required by ORS 537.545 & 537.765 and OAR 690-205-0210)

1/24/2022

(1) LAND OWNER

Owner Well I.D. _____

First Name _____ Last Name _____

Company COUNTRYSIDE ACRES LLC

Address 31900 S DRYLAND RD

City MOLALLA State OR Zip 97038

(2) TYPE OF WORK☒ New Well ☐ Deepening ☐ Conversion☐ 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: _____

(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 500.00 ft.

BORE HOLE

Dia	From	To	Material	From	To	Amt	sacks/lbs
18	0	18	Bentonite Chips	0	10	25	S
16	18	197			Calculated	12	
12	197	514	Cement	10	190	190	S
					Calculated	76	

How was seal placed: Method ☐ A ☐ B ☒ C ☐ D ☐ E☐ Other _____

Backfill placed from 500 ft. to 514 ft. Material SLOUGH & SILICA

Filter pack from 164 ft. to 500 ft. Material SILICA SA Size 8/12

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
☒	☐	12	☒	2	190	.250	☒	☐	☒	☐
☐	☒	8	☐	164	184	.250	☒	☐	☒	☐
☐	☒	8	☐	194	230	.250	☒	☐	☒	☐
☐	☒	8	☐	235	324	.250	☒	☐	☒	☐
☐	☒	8	☐	339	407	.250	☒	☐	☒	☐

Shoe ☐ Inside ☐ Outside ☐ Other Location of shoe(s) _____Temp casing ☐ Yes Dia _____ From + _____ To _____**(7) PERFORATIONS/SCREENS**

Perforations Method _____

Screens Type V-Shaped Wire Wrap Material 304SS

Perf/ Screen	Casing/ Liner	Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ pipe size
Screen	Liner	8	184	194	40			8
Screen	Liner	8	230	235	40			8
Screen	Liner	8	324	339	40			8
Screen	Liner	8	407	412	40			8
Screen	Liner	8	434	444	40			8

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

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
335	126	280	4

Temperature 55 °F Lab analysis ☐ Yes By _____Water quality concerns? ☐ Yes (describe below) TDS amount 60 ppm

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County CLACKAMAS Twp 5.00 S N/S Range 1.00 E E/W WM

Sec 11 NW 1/4 of the SE 1/4 Tax Lot 51E11 01000

Tax Map Number 51E11 Lot 1000

Lat _____ ° _____ ' _____ " or 45.14868171 DMS or DD

Long _____ ° _____ ' _____ " or -122.64568995 DMS or DD

☐ Street address of well ☒ Nearest address

31900 S DRYLAND RD, MOLALLA, OR 97038

(10) STATIC WATER LEVEL

	Date	SWL (psi)	+	SWL (ft)
Existing Well / Pre-Alteration				
Completed Well	1/6/2022			121

Flowing Artesian? ☐ Dry Hole? ☐**WATER BEARING ZONES**

Depth water was first found 10.00

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

11/15/2021	10	80	0		10
1/6/2022	190	483	400		120

(11) WELL LOG

Ground Elevation _____

Material	From	To
Top Soil, sandy, loam	0	4
Clay, light brown, medium soft	4	15
Gravel and cobbles with clay 6" minus	15	18
Gravel and cobbles some cementation	18	51
Gravel, 2" minus, cemented	51	56
Gravel with clay, brown	56	74
Gravel 1-1/2 minus	74	80
Clay, grey, medium to firm, some gravel	80	98
Clay, brown, medium	98	106
Clay, grey, medium, some gravel	106	109
Clay, grey, medium to soft, sticky, grav	109	113
Clay, grey and brown, soft, sticky, s/grv	113	118
Clay, brown, firm	118	134
Clay, brown, medium, lenses of sand, cmt	134	144
Clay, grey, med, lenses of sand cemented	144	164
Clay, grey, medium, sticky with 3" gravel	164	173
Clay, grey, medium, silty, w/3" gravel	173	177
Clay, grey, soft, silty	177	192
Sand, black, medium coarse	192	194

Date Started 11/5/2021

Completed 1/11/2022

(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 2033

Date 1/24/2022

Signed ZACHARY LANG (E-filed)

(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 1988

Date 1/24/2022

Signed ERIC SCHNEIDER (E-filed)

Contact Info (optional) _____

ORIGINAL - WATER RESOURCES DEPARTMENT

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

New exempt use wells must be submitted with a map and recording fee.

WATER SUPPLY WELL REPORT - Map with location identified must be attached and shall include an approximate scale and north arrow

CLAC 76948

1/24/2022

Map of Hole

STATE OF OREGON WELL LOCATION MAP

This map is supplemental to the WATER SUPPLY WELL REPORT

Oregon Water Resources Department

725 Summer St NE, Salem OR 97301
(503)986-0900



LOCATION OF WELL

Latitude: 45.14868171 Datum: WGS84

Longitude: -122.64568995

Township/Range/Section/Quarter-Quarter Section:

WM5.00S1.00E11NWSE

Address of Well:

31900 S DRYLAND RD, MOLALLA, OR 97038

Well Label: 143578

Printed: January 20, 2022

DISCLAIMER: This map is intended to represent the approximate location the well. It is not intended to be construed as survey accurate in any manner.

Provided by well constructor

