

STATE OF OREGON
WATER SUPPLY WELL REPORT

WESTERBERG DRILLING INC
PO BOX 1228
MOLALLA, OR 97038

WELL I.D. LABEL# L 145225
START CARD # 217164
ORIGINAL LOG #

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

(1) LAND OWNER
Owner Well I.D. _____
First Name Aaron & Wendy Last Name Nofziger
Company _____
Address 28770 S Elisha Rd
City Canby State OR Zip 97013

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

(2a) PRE-ALTERATION
Dia + From To Gauge Stil 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 345 ft.

BORE HOLE			SEAL			sacks/
Dia	From	To	Material	From	To	lbs
14	0	40	Bentonite	0	5	4 S
10	40	378			Calculated	4
			Cement	5	40	37 S
					Calculated	14

How was seal placed: Method A B C D E
 Other bent placed dry & hydrated
Backfill placed from 345 ft. to 378 ft. Material pea gravel
Filter pack from 171 ft. to 345 ft. Material css Size 6/9
Explosives used: Yes Type _____ Amount _____

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

(6) CASING/LINER
Casing Liner Dia + From To Gauge Stil Plstc Wld Thrd
riser well casing
10 1.5 209 250
8 169 209 250
6x8 6 209 209.5 312
6 219.5 250 250
6 256 272 250
Shoe Inside Outside Other Location of shoe(s) 354
Temp casing Yes Dia 14 From + 1 To 38' 7 1/4"

(7) PERFORATIONS/SCREENS
Perforations Method _____
Screens Type v-wire Material S.S.
Perf/S Casing/Screen
reen Liner Dia From To Scrm/slot Slot # of Tel/
width length slots pipe size
Screen 6 209.5 219 .065 _____ P/S
Screen 6 250 256 .065 _____ P/S
Screen 6 272 282 .065 _____ P/S
Screen 6 287 306 .065 _____ P/S
Screen 6 320 330 .065 _____ P/S

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailor Air Flowing Artesian
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)
450 68 190 4

Temperature 55 °F Lab analysis Yes By _____
Water quality concerns? Yes (describe below) TDS amount 210 ppm
From To Description Amount Units

(9) LOCATION OF WELL (legal description)
County CLACKAMAS Twp 4 S N/S Range 1 E E/W WM
Sec 25 SW 1/4 of the SW 1/4 Tax Lot 1300
Tax Map Number _____ Lot _____
Lat _____ or 45.18917 DMS or DD
Long _____ or -122.64003 DMS or DD
 Street address of well Nearest address

Same

(10) STATIC WATER LEVEL

Existing Well / Pre-Alteration	Date	SWL (psi)	+ SWL (ft)
Completed Well	04-18-2022		42

Flowing Artesian? Dry Hole?

WATER BEARING ZONES Depth water was first found 58

SWL Date	From	To	Est Flow	SWL (psi)	+ SWL (ft)
	118	114	10		
	145	155	50+		
	210	217	50+		
	251	255	n/k		
	273	281	n/k		

(11) WELL LOG Ground Elevation _____

Material	From	To
soil	0	1
clay brown	1	14
clay blue	14	20
cemented gravel grey & brown	20	50
cemented gravel with white clay	50	58
cemented gravel	58	114
gravel & gravel & clay	114	120
cemented gravel	120	126
packed silt brown	126	133
clay tan	133	145
cemented sand brown coarse	145	155
packed silt blue grey	155	160
packed silt grey with clay lenses	160	188
clay grey sticky sticky	188	201
sand & gravel	201	207
packed silt	207	210
sand grey medium to coarse	210	218
packed silt grey	218	224
clay sticky blue grey	224	230

Date Started 01-26-2022 Completed 04-27-2022

(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 1358 Date 06-02-2022
Signed *Byron Bell*

(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 688 Date 06-02-2022
Signed *Steven N. Stadelis*
Contact Info (optional) _____

CLAC 77268

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WATER SUPPLY WELL REPORT -
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(2a) PRE-ALTERATION

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

(5) BORE HOLE CONSTRUCTION

BORE HOLE			SEAL		sacks/		
Dia	From	To	Material	From	To	Amt	lbs
						Calculated	
						Calculated	
						Calculated	
						Calculated	

FILTER PACK

From	To	Material	Size

(6) CASING/LINER

Casing Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
	6		282	287	250				
	6		306	320	250				
	6		330	336	250				
	6		340	345	250				

tail

(7) PERFORATIONS/SCREENS

Perf/S	Casing/Screen	Screen Dia	From	To	Scrm/slot width	Slot length	# of slots	Tele/pipe size
Screen		6	336	340	.065			p/s

Water Quality Concerns

From	To	Description	Amount	Units

(10) STATIC WATER LEVEL

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
	288	297	n/k		
	301	305	n/k		
	321	329	n/k		
	337	339	n/k		

(11) WELL LOG

Material	From	To
packed silt grey hard	230	251
sand slightly cemented grey	251	255
packed silt grey & green	255	273
cemented sand green & grey	273	281
packed silt	281	288
sand grey loose medium	288	297
packed silt	297	301
sand grey	301	305
clay & packed silt grey & green	305	321
sand grey	321	329
clay grey	329	337
sand fine	337	339
clay & packed silt tan & grey	339	378

RECEIVED

JUN 23 2022

OWRD

Comments/Remarks

10" drive shoe cut off @ 354 ft
This well is for permit #G-18735

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

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