STATE OF OREGON

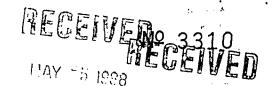
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WATER WELL REPORT MAY 19 1988 (as required by ORS 537.765) JANELOGATION OF WELL by legal description: Well Number: (1) OWNER: Name Jack Parsons SALEM, ORECOMY Clackamapatitude Township E or W, WM. · State (2) TYPE OF WORK: Street Address of Well (or nearest address) 25460 ☐ Recondition XNew Well ☐ Deepen ☐ Abandon Sherwood, (3) DRILL METHOD Rotary Air ☐ Cable ☐ Rotary Mud (10) STATIC WATER LEVEL: ☐ Other ft. below land surface. (4) PROPOSED USE: Artesian pressure . _____ Ib. per square inch. ☐ Domestic Irrigation ☐ Community ☐ Industrial (11) WATER BEARING ZONES: ☐ Thermal ☐ Injection ☐ Other Depth at which water was first found BORE HOLE CONSTRUCTION: al Construction approval Yes From Depth of Completed Well Estimated Flow Rate Yes No 50' 8 GPM 70 Explosives used X Туре Amount HOLE SEAL 120 Amount meter From Material To From sacks or pounds (12) WELL LOG: Cement sacks Ground elevation From То SWL op Soi 0 How was seal placed: Method A B A C D 2 Clau Other . Inner beds of Black Basalt & Backfill placed from _____ft. to _____ft. Material Gravel placed from ___ _ft. to ___ Size of gravel CASING/LINER: <u>lt Decomp. Brown Rock</u> Gauge Steel Plastic Welded Threaded Hand Gn/Bnwn. Basalt X X \Box Hard Grau Basalt 90 location of shoe(s) . PERFORATIONS/SCREENS: ☐ Perforations Method . ☐ Screens Material Slot Tele/pipe size Number Diameter size Casing Liner Completed (unbonded) Water Well Constructor Certification: (8) WELL TESTS: Minimum testing time is 1 hour I certify that the work I performed on the construction, alteration, or Flowing abandonment of this well is in compliance with Oregon well construction ☐ Pump ☐ Bailer XX Air ☐ Artesian standards. Materials used and information reported above are true to my best Yield gal/min Drawdown Drill stem at Time knowledge and belief. WWC Number 30 GPM 150' 1 hr. Signed . (bonded) Water Well Constructor Certification: I accept responsibility for the construction, alteration, or abandonment 560 Temperature of water. ___Depth Artesian Flow Found . work performed on this well during the construction, atteration, or abandonment work performed during this time in compliance with Oregon well construction standards. This report is true to the best of my knowledge and belief. Was a water analysis done? ☐ Yes By whom Did any strata contain water not suitable for intended use? ☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other Formation needed belief. WWC Number casin, to impe Depth of strata:



"START CARD" WATER DESCURCES DEPT. 26 1988 NOTICE OF BEGINNING OF WELL CONSTRUCTION, OR WATER RESOURCES DEPT. SAI EM OPEOCO.

SALEM, OREGON This form must be completed, signed by both the owner (or authorized agent) and constructor, and the original delivered to the Water Resources Department prior to commencement of construction, alteration or abandonment of each well.

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Owner's Name and Mailing Address	P.O. BK728	
<u></u>	CAN6 10RE 97013	
Proposed Commencem	ent Date 4/8/88	
Proposed Well Depth	700 Diameter 8	•
☐ Domestic☐ Thermal	☐ Community ☐ Industrial ☐ Irrigati	on
Proposed Well Location	: County CLACK (E ow Section	arch
Township	1. Stange 1/4 of above section	
At least 2 of these	2. street address of 25460 BW BAKE well location Shake 9714	,
must be provided	3. tax lot number of well location	
•	attach approved map with location identified. (see reverse of this form for approved maps)	
provided herein is accur	ve have read the back of this form, and that to the best of our knowledge rate and the well is being properly located from septic tanks and septic tanks.	drain fields.
1 () com	Title License No. 645	1(-
Note: This is not a Water	Company +*22500 \ X2	Pight through the

Water Resources Department if required.

Form 537.762 1987