

STATE OF OREGON WATER SUPPLY WELL REPORT

CLAC 79700

WELL I.D. LABEL# L

156988

START CARD #

1081489

ORIGINAL LOG #

CLAC

13331

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

3/12/2026

(1) LAND OWNER

Owner Well I.D.

First Name JERRY Last Name
Company SIMNITT NURSERY
Address 138 NE 22 ND
City CANBY State OR Zip 97013

(2) TYPE OF WORK

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

(2a) PRE-ALTERATION

Table with columns: Dia, From, To, Gauge, Stl, Plstc, Wld, Thrd. Row 1: 10, 0, 275, 0.250, X, O, , .

(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

Depth of Completed Well 281.00 ft. Special Standard (Attach copy)

Table with columns: Dia, From, To, Material, SEAL, Amt, sacks/lbs. Row 1: 10, 0, 281, , , , , .

Seal placement method: A B C D E Other:
Backfill placed from ft. to ft. Material
Filter pack from ft. to ft. Material Size
Explosives used: Type Amount
Seal Placement Begin Date Begin Time

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount Actual Amount

(6) CASING/LINER

Table with columns: C/L, Dia, From, To, Gauge, Mat. Type, Wld, Thrd, Shoe, Location. Row 1: C, 10, X, 2.8, 0, 0.250, ST, X, , , .

Temp casing Yes Dia From+ To

(7) PERFORATIONS/SCREENS

Perforations Method Saw

Table with columns: Perf/ Screen, Casing/ Screen, Dia, From, To, Scrm/slot width, Slot length, # of slots, Tele/ Pipe size. Row 1: Perf, Liner, 8, 241, 251, .18, 8, 100, .

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

Table with columns: Type of Test, Yield (gal/min), Drawdown, Drill Stem/ Pump Depth, Duration (hr). Row 1: Air, 250, , 280, 1.

Temperature 59 °F Lab analysis Yes By
Water quality concerns? Yes (describe below) TDS amount 122 ppm
From To Description Amount Units

(9) LOCATION OF WELL (legal description)

County CLACKAMAS Twp 4.00 S N/S Range 1.00 E E/W WM
Sec 18 NE 1/4 of the NE 1/4 Tax Lot 101
Tax Map Number Lot
Lat " or 45.22787437 DMS or DD
Long " or -122.72447245 DMS or DD
Street address of well Nearest address

6900 S LONE ELDER RD

(10) STATIC WATER LEVEL

Table with columns: Existing Well / Pre-Alteration, Date, SWL(psi), SWL(ft). Row 1: 3/10/2026, 84.

WATER BEARING ZONES

Table with columns: SWL Date, From, To, Est Flow, SWL(psi), SWL(ft). Row 1: 3/12/2026, 84, 281, 250, 84.

(11) WELL LOG

Ground Elevation 168.12 FT

Table with columns: Material, From, To. Row 1: Raised well Casing, 0, 3. Row 2: Installed Screen & Liner, 3, 281.

Construction

Begin Date 3/10/2026 Begin Time 13:00 End Date 3/12/2026

(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 1771 Date 3/12/2026
Signed GEORGE YOUNGBERG (E-filed)
Drilling Company:

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

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3/12/2026

Map of Hole

STATE OF OREGON WELL LOCATION MAP	Oregon Water Resources Department 725 Summer St NE, Salem OR 97301 (503)986-0900	
This map is supplemental to the WATER SUPPLY WELL REPORT		
LOCATION OF WELL	Well Label: 156988	
Latitude: 45.22787437 Datum: WGS84	Printed: March 12, 2026	
Longitude: -122.72447245	<small>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.</small>	
Township/Range/Section/Quarter-Quarter Section:	<small>Provided by well constructor</small>	
WM4.00S1.00E18NENE		
Address of Well:		
6900 S LONE ELDER RD		

