

STATE OF OREGON
WATER SUPPLY WELL REPORT

CLAC 79934

WELL I.D. LABEL# L

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158629

START CARD #

1082690

ORIGINAL LOG #

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

7/30/2026

(1) LAND OWNER

Owner Well I.D.

First Name WILBUR

Last Name AKINS

Company

Address 15490 SE 262ND 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

Casing: Dia + From To Gauge Stl Plstc Wld Thrd

Material From To Amt sacks/lbs

Seal: Dia + From To Amt sacks/lbs

(3) DRILL METHOD

☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger

☐ Reverse Rotary ☒ Other MITSUBISHI ULTRA MAX

(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 298.00 ft.

BORE HOLE

Dia	From	To	Material	From	To	Amt	sacks/lbs
10.9	0	59	Bentonite	0	18	12	S
7.44	59	298			Calculated	10.89	
5.5	298	302	Cement with 5% Bently	18	59	14	S
					Calculated	10.42	

Seal placement method: ☐ A ☐ B ☒ C ☐ D ☐ E ☒ Other: POURED

Backfill placed from ft. to ft. Material

Filter pack from ft. to ft. Material Size

Explosives used: ☐ Type Amount

Seal Placement Begin Date 7/27/2026 Begin Time 09 00

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount

Actual Amount

(6) CASING/LINER

C/L	Dia	+ From To Gauge	Mat. Type	Wld	Thrd	Shoe	Location
C	6	☒ 1.5 287 0.250	ST	☒		IN.	298
L	5	☐ 181 288 .258	ST	☒			

Temp casing ☒ Yes Dia 10 From + ☒ 1 To 59

(7) PERFORATIONS/SCREENS

Perforations Method

Screens Type Wire-Wrap

Material Stainless Steel

Perf/ Screen	Casing/ Liner	Screen Dia	From	To	Scrm/slot width	Slot length	# of slots	Tele/ Pipe size
		5	288	298	.08			Pipe Size

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

Type of Test	Yield (gal/min)	Drawdown	Drill Stem/ Pump Depth	Duration (hr)
Air	25		288	2

Temperature 58 °F Lab analysis ☒ Yes By SDI, Iron 2.0 ppm

Water quality concerns? ☐ Yes (describe below) TDS amount 57 ppm

From	To	Description	Amount	Units
236	248	Color	17	gpm

(9) LOCATION OF WELL (legal description)

County CLACKAMAS Twp 2.00 S N/S Range 3.00 E E/W WM

Sec 12 NW 1/4 of the SW 1/4 Tax Lot 1907

Tax Map Number 23E12

Lot

Lat ° ' " or 45.40997200 DMS or DD

Long ° ' " or -122.39230000 DMS or DD

☒ Street address of well ☐ Nearest address

15490 SE 262ND AVE, BORING

(10) STATIC WATER LEVEL

	Date	SWL (psi)	+	SWL (ft)
Existing Well / Pre-Alteration				
Completed Well	7/28/2026			212
Flowing Artesian?	☐			
Dry Hole?	☐			

WATER BEARING ZONES

Depth water was first found 236.00

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
7/21/2026	236	248	17			212
7/21/2026	289	297	42			212

(11) WELL LOG

Ground Elevation 573.24 FT

Material	From	To
Topsoil, brown	0	2
Clay, tan	2	8
Clay, reddish brown	8	15
Sandstone, tan	15	26
Conglomerate w/ cobble, multicolored	26	42
Clay, brown	42	80
Sand, brown, cemented	80	110
Sand, gray & brown, cemented	110	128
Conglomerate, multicolored w/ gravels	128	158
Gravels, medium	158	223
Clay, blue, sandy, silty	223	236
Sand, gray, cemented	236	248
Conglomerate w/ sand, multicolored	248	271
Sand, gray, cemented	271	289
Sand, gray, fine	289	297
Clay w/ claystone, gray	297	302

Construction

Begin Date 7/9/2026 Begin Time 11 30 End Date 7/28/2026

(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. Materials used and information reported above are true to the best of my knowledge and belief.

License Number 1884 Date 7/28/2026

Signed JUSTIN MELONUK (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 2006 Date 7/30/2026

Signed CHRISTEN BLAND (E-filed)

Drilling Company: Skyles Drilling, Inc. (503)656-2683

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.

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

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7/30/2026

Map of Hole

