

STATE OF OREGON
WATER SUPPLY WELL REPORT

CLAC 79957

WELL I.D. LABEL# L

157220

START CARD #

1082566

ORIGINAL LOG #

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

8/14/2026

(1) LAND OWNER

Owner Well I.D. _____

First Name DAVELast Name JORDAHL

Company _____

Address 39905 SE FALL CREEK RDCity ESTACADAState ORZip 97023**(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☐ 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 461.00 ft.

BORE HOLE			SEAL			Amt	sacks/ lbs
Dia	From	To	Material	From	To		
10	0	50	Bentonite Chips	0	11	9	S
7.65	50	410	Calculated			5.02	
9	410	428	Cement with 3% Benti	11	50	1880	P
5.5	428	461	Calculated			793.37	

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

Backfill placed from _____ ft. to _____ ft. Material _____

Filter pack from _____ ft. to _____ ft. Material _____ Size _____

Explosives used: ☐ Type _____ Amount _____Seal Placement Begin Date 8/7/2026 Begin Time 08 00**(5a) ABANDONMENT USING UNHYDRATED BENTONITE**

Proposed Amount

Actual Amount

(6) CASING/LINER

C/L	Dia	+	From	To	Gauge	Mat. Type	Wld	Thrd	Shoe	Shoe Location
C	6	☒	2	428	0.250	ST	☒		IN.	428
L	4		21	441	Sch40	PL		☒		

Temp casing ☒ Yes Dia 10 From + ☒ 1 To 19**(7) PERFORATIONS/SCREENS**

Perforations Method _____

Screens Type quiklok Material pvc

Perf/ Screen	Casing/ Liner	Screen Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ Pipe size
		4	441	461	.32			

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

Type of Test	Yield (gal/min)	Drawdown	Drill Stem/ Pump Depth	Duration (hr)
Air	17		461	1.5

Temperature 58 °F Lab analysis ☐ Yes By _____Water quality concerns? ☐ Yes (describe below) TDS amount 52 ppm

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)County CLACKAMAS Twp 4.00 S N/S Range 4.00 E E/W WMSec 1 NE 1/4 of the NE 1/4 Tax Lot 100

Tax Map Number _____ Lot _____

Lat _____ ° _____ ' _____ " or 45.25588358 DMS or DD

Long _____ ° _____ ' _____ " or -122.25283650 DMS or DD

☒ Street address of well ☐ Nearest address39905 SE FALL CREEK RD, ESTACADA, OR 97023**(10) STATIC WATER LEVEL**

	Date	SWL (psi)	+	SWL (ft)
Existing Well / Pre-Alteration				
Completed Well	8/7/2026			339
Flowing Artesian? ☐ Dry Hole? ☐				

WATER BEARING ZONES

Depth water was first found 420.00

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
8/7/2026	420	461	17			339

(11) WELL LOGGround Elevation 1322.05 FT

Material	From	To
TOP SOIL	0	2
BROWN CLAY	2	17
REDDISH BROWN CLAY	17	38
RED CLAY W. GRAVEL SEAMS	38	67
FRACTURED META. M/C ROCK	67	137
RED/ BROWN CLAY W/ SAND SEAMS	137	144
BROWN CLAY W/ SAND SEAMS	144	151
GRAY CLAY STICKY	151	158
RED CLAY	158	185
BROWN CLAY	185	218
GRAY CLAY	218	255
GRAY CLAY W/ SAND SEAMS	255	278
RED / GRAY CLAY W/ SAND SEAMS	278	383
SANDSTONE	383	428
GRAY BASALT MED. HARD	428	461

Construction

Begin Date 6/22/2026 Begin Time 10 00 End Date 8/7/2026**(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 _____ 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. 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 1771 Date 8/14/2026Signed GEORGE YOUNGBERG (E-filed)Drilling Company: Youngberg Pump And Well Drilling LLC

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

CLAC 79957

8/14/2026

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: 45.25588358 Datum: WGS84

Longitude: -122.25283650

Township/Range/Section/Quarter-Quarter Section:
WM4.00S4.00E1NENE

Address of Well:

39905 SE FALL CREEK RD, ESTACADA, OR 97023

Well Label: 157220

Printed: August 14, 2026

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

