

**STATE OF OREGON  
WATER SUPPLY WELL REPORT**

CLAC 79992

WELL I.D. LABEL# L

141636

START CARD #

1082643

ORIGINAL LOG #

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

9/3/2026

**(1) LAND OWNER**

Owner Well I.D. \_\_\_\_\_

First Name NICKLast Name BERRY

Company \_\_\_\_\_

Address 2108 SE SILVER SPRINGS RD.City MILWAUKIE State OR Zip 97222**(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 146.00 ft.

| BORE HOLE |      |     |                 | SEAL |            |      | sacks/ |
|-----------|------|-----|-----------------|------|------------|------|--------|
| Dia       | From | To  | Material        | From | To         | Amt  | lbs    |
| 10        | 0    | 60  | Bentonite Chips | 0    | 60         | 35   | S      |
| 6         | 60   | 146 |                 |      | Calculated | 30.3 |        |
|           |      |     |                 |      | Calculated |      |        |

Seal placement method: ☐ A ☐ B ☐ C ☐ D ☐ E ☒ Other: OAR 690-210-0340

Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_

Filter pack from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_ Size \_\_\_\_\_

Explosives used: ☐ Type \_\_\_\_\_ Amount \_\_\_\_\_Seal Placement Begin Date 7/23/2026 Begin Time 11 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   | <input checked="" type="checkbox"/> | 4    | 136.75 | 0.250 | ST        | <input checked="" type="checkbox"/> |      | OUT. | 136.75   |
|     |     |                                     |      |        |       |           |                                     |      |      |          |
|     |     |                                     |      |        |       |           |                                     |      |      |          |
|     |     |                                     |      |        |       |           |                                     |      |      |          |
|     |     |                                     |      |        |       |           |                                     |      |      |          |

Temp casing ☒ Yes Dia 10 From + ☒ 2 To 56**(7) PERFORATIONS/SCREENS**

Perforations Method \_\_\_\_\_

Screens Type slotted Material pvc

| Perf/ Screen | Casing/ Liner | Screen Dia | From  | To  | Scrn/slot width | Slot length | # of slots | Tele/ Pipe size |
|--------------|---------------|------------|-------|-----|-----------------|-------------|------------|-----------------|
|              |               | 4          | 125.5 | 146 | .032            |             |            |                 |
|              |               |            |       |     |                 |             |            |                 |
|              |               |            |       |     |                 |             |            |                 |
|              |               |            |       |     |                 |             |            |                 |

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

| Type of Test | Yield (gal/min) | Drawdown | Drill Stem/ Pump Depth | Duration (hr) |
|--------------|-----------------|----------|------------------------|---------------|
| Pump         | 30              | 25.5     | 105                    | 2             |
| Pump         | 25              | 28       | 105                    | 10            |

Temperature 54 °F Lab analysis ☐ Yes By \_\_\_\_\_Water quality concerns? ☐ Yes (describe below) TDS amount 93 ppm

| From | To | Description | Amount | Units |
|------|----|-------------|--------|-------|
|      |    |             |        |       |
|      |    |             |        |       |

**(9) LOCATION OF WELL (legal description)**County CLACKAMAS Twp 4.00 S N/S Range 2.00 E E/W WMSec 21 NE 1/4 of the NW 1/4 Tax Lot 1502

Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_

Lat \_\_\_\_\_ ° \_\_\_\_\_ ' \_\_\_\_\_ " or 45.21482713 DMS or DDLong \_\_\_\_\_ ° \_\_\_\_\_ ' \_\_\_\_\_ " or -122.57359137 DMS or DD☒ Street address of well ☐ Nearest address27004 S. RANCH RD. MULINO 97042**(10) STATIC WATER LEVEL**

|                                | Date                     | SWL (psi) | + | SWL (ft) |
|--------------------------------|--------------------------|-----------|---|----------|
| Existing Well / Pre-Alteration |                          |           |   |          |
| Completed Well                 | <u>8/5/2026</u>          |           |   | <u>7</u> |
| Flowing Artesian?              | <input type="checkbox"/> |           |   |          |
| Dry Hole?                      | <input type="checkbox"/> |           |   |          |

WATER BEARING ZONES

Depth water was first found 30.00

| SWL Date  | From | To  | Est Flow | SWL (psi) | + | SWL (ft) |
|-----------|------|-----|----------|-----------|---|----------|
| 6/29/2026 | 30   | 35  | 20       |           |   | 13       |
| 7/10/2026 | 138  | 144 | 50       |           |   | 7        |
|           |      |     |          |           |   |          |
|           |      |     |          |           |   |          |
|           |      |     |          |           |   |          |

**(11) WELL LOG**Ground Elevation 225.46 FT

| Material                                     | From | To  |
|----------------------------------------------|------|-----|
| top soil                                     | 0    | 2   |
| brown clay                                   | 2    | 6   |
| green clay                                   | 6    | 10  |
| grey clay and gravel                         | 10   | 14  |
| grey clay medium                             | 14   | 30  |
| grey clay and gravel                         | 30   | 35  |
| blue grey clay hard sticky                   | 35   | 64  |
| grey clay sandy                              | 64   | 77  |
| grey clay sticky                             | 77   | 101 |
| dark grey silt and sand                      | 101  | 108 |
| grey clay sticky                             | 108  | 115 |
| blue grey clay hard                          | 115  | 124 |
| dark grey clay sandy                         | 124  | 130 |
| grey clay medium                             | 130  | 138 |
| grey and blue clay and small gravel and sand | 138  | 144 |
| grey clay medium                             | 144  | 146 |
|                                              |      |     |
|                                              |      |     |
|                                              |      |     |

Construction

Begin Date 6/25/2026 Begin Time 09 00 End Date 8/5/2026**(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 2041 Date 8/13/2026Signed TRAVIS RUSH (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 783 Date 9/3/2026Signed IVAN GROSSEN (E-filed)Drilling Company: grossen well drilling

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.

|                                                                                                            |
|------------------------------------------------------------------------------------------------------------|
| top of pvc screen is 4" pipe size pvc bell with cir-lock groove drill-able<br>plug in bottom of pvc screen |
|------------------------------------------------------------------------------------------------------------|

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

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9/3/2026

## Map of Hole

