

STATE OF OREGON
WATER SUPPLY WELL REPORT

CLAC 79997

WELL I.D. LABEL# L

159787

START CARD #

1083011

ORIGINAL LOG #

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

9/9/2026

(1) LAND OWNER

Owner Well I.D. 26-26

First Name TAYLOR

Last Name HART

Company

Address 26289 SW MOUNTAIN RD

City WEST LINN State OR Zip 97068

(2) TYPE OF WORK☒ New Well ☐ Deepening ☐ Conversion☐ Alteration (complete 2a & 10) ☐ Abandonment (complete 5a)**(2a) PRE-ALTERATION**

Casing: Dia + From To Gauge Std Plstc Wld Thrd
Material From To Amt sacks/lbs
Seal: Material From To Amt sacks/lbs

(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 542.00 ft.

BORE HOLE				SEAL			
Dia	From	To	Material	From	To	Amt	sacks/lbs
10	0	310	Bentonite Chips	0	174	152	S
6.1	310	542	Calculated			79.41	
			Cement with 2% Bently	174	310	70	S
			Calculated			31.46	

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

Backfill placed from ft. to ft. Material

Filter pack from ft. to ft. Material Size

Explosives used: ☐ Type Amount

Seal Placement Begin Date 8/27/2026 Begin Time 15:00

(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	☒ 2 345 0.250	ST	☒		OUT. 345
L	4.5	☐ 22 542 Sch40	PL		☒	

Temp casing ☒ Yes Dia 10 From + 0 To 39**(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
Screen	Liner	4.5	502	542	.032			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	120		540	2

Temperature 53 °F Lab analysis ☐ Yes ByWater quality concerns? ☐ Yes (describe below) TDS amount 160 ppm

From To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County CLACKAMAS Twp 3.00 S N/S Range 1.00 E E/W WM

Sec 9 NW 1/4 of the NW 1/4 Tax Lot 802

Tax Map Number Lot

Lat ° ' " or 45.32908800 DMS or DD

Long ° ' " or -122.70042000 DMS or DD

☒ Street address of well ☐ Nearest address

26289 SW MOUNTAIN RD, WEST LINN, OR 97068

(10) STATIC WATER LEVEL

	Date	SWL (psi)	+	SWL (ft)
Existing Well / Pre-Alteration				
Completed Well	9/4/2026			221
Flowing Artesian? ☐ Dry Hole? ☐				

WATER BEARING ZONES

Depth water was first found 216.00

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
8/13/2026	216	270	12			175
9/1/2026	470	473	7			221
9/1/2026	528	542	120			221

(11) WELL LOG

Ground Elevation 294.62 FT

Material	From	To
top soil	0	1
clay brwn w/few boulders	1	15
rock brwn withd bkn caving	15	26
rock brwn withd bkn prog firmer	26	50
basalt decomp brwn occ gray	50	76
basalt gray med w/occ brwn	76	90
basalt brwn med slightly decomp some withd	90	174
basalt brwn/red/gray bkn (loose)	174	183
basalt brwn hrd	183	216
basalt gray/brwn med-hrd fract	216	242
basalt gray occ fract	242	270
clay orange & tan	270	291
basalt gray med occ brwn & red	291	322
clay red & brwn sloughing	322	337
basalt gray harder	337	341
basalt gray/blk hrd	341	403
basalt red soft	403	408
basalt gray med occ green	408	414
basalt gray hrd	414	470

Construction

Begin Date 8/13/2026 Begin Time 09:30 End Date 9/4/2026

(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 1483 Date 9/9/2026

Signed JOHN STADELI (E-filed)

Drilling Company: Arrow Drilling 503-538-4422

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.

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

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9/9/2026

Map of Hole

