

Instructions for completing this report are on the last page of this form.

(1) OWNER/PROJECT WELL NO. MW-2A  
 Name UNION BANK OF CALIFORNIA  
 Address PO BOX 3121  
 City PORTLAND State OR Zip 97208

(6) LOCATION OF WELL By legal description:  
 County CLATSOP Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
 Township 8N (N or S) Range 9W (E or W) Section 8  
NW 1/4 of SW 1/4 of above section.  
 Street address of well location 927 MARINE DR.  
ASTORIA, OR 97103  
 Tax lot number of well location 5500  
 ATTACH MAP WITH LOCATION IDENTIFIED. Map shall include  
 approximate scale and north arrow.

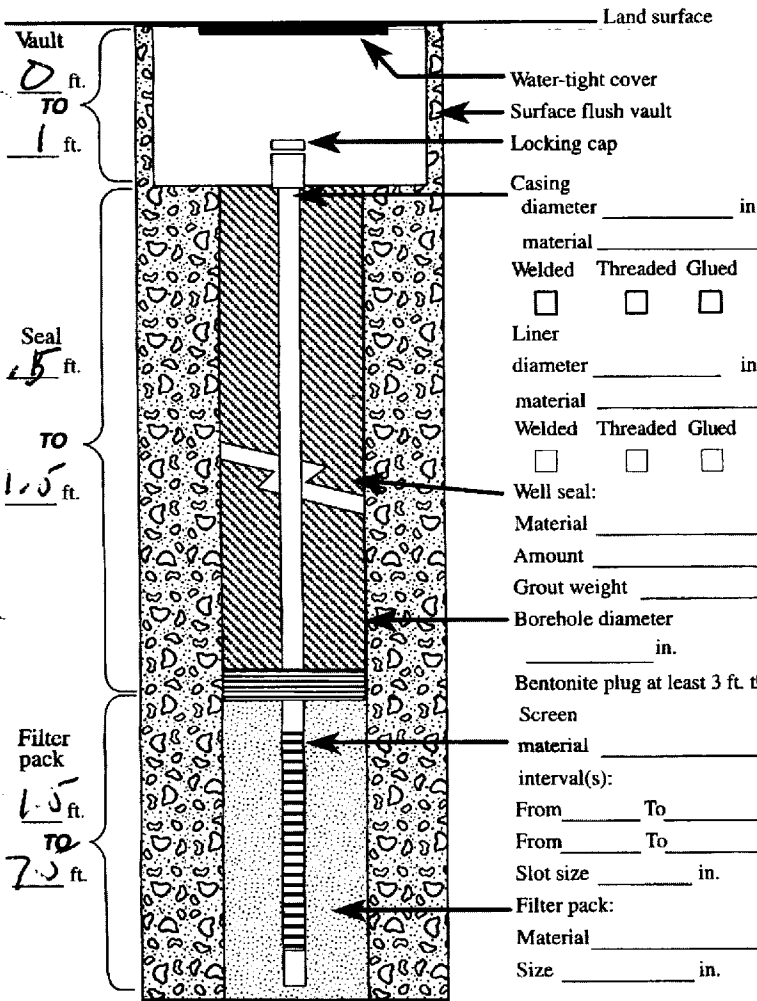
(2) TYPE OF WORK  
 New construction     Alteration (Repair/Recondition)  
 Conversion         Deepening         Abandonment

(3) DRILLING METHOD  
 Rotary Air                 Rotary Mud         Cable  
 Hollow Stem Auger       Other VACUUM EXCAVATE

(7) STATIC WATER LEVEL:  
 \_\_\_\_\_ Ft. below land surface.        Date \_\_\_\_\_  
 Artesian Pressure \_\_\_\_\_ lb/sq. in.      Date \_\_\_\_\_

(4) BORE HOLE CONSTRUCTION:  
 Special Standards    Yes  No   
 Depth of Completed Well 7.5 ft.

(8) WATER BEARING ZONES:  
 Depth at which water was first found \_\_\_\_\_



| From | To | Est. Flow Rate | SWL |
|------|----|----------------|-----|
|      |    |                |     |
|      |    |                |     |
|      |    |                |     |
|      |    |                |     |

(9) WELL LOG:  
 Ground Elevation \_\_\_\_\_

| Material  | From | To | SWL |
|---|------|----|-----|
| <u>REMOVED SURFACE COMPLETION PLACE 10" TEMP CASING TO 7.5'</u> |      |    |     |
| <u>VACUUM EXCAVATE TO REMOVE SEAL, FILTER PACK AND PVC WELL</u> |      |    |     |
| <u>PLACE 5-BAGS BENTONITE AND REMOVE TEMP CASING</u>            |      |    |     |
|   |      |    |     |
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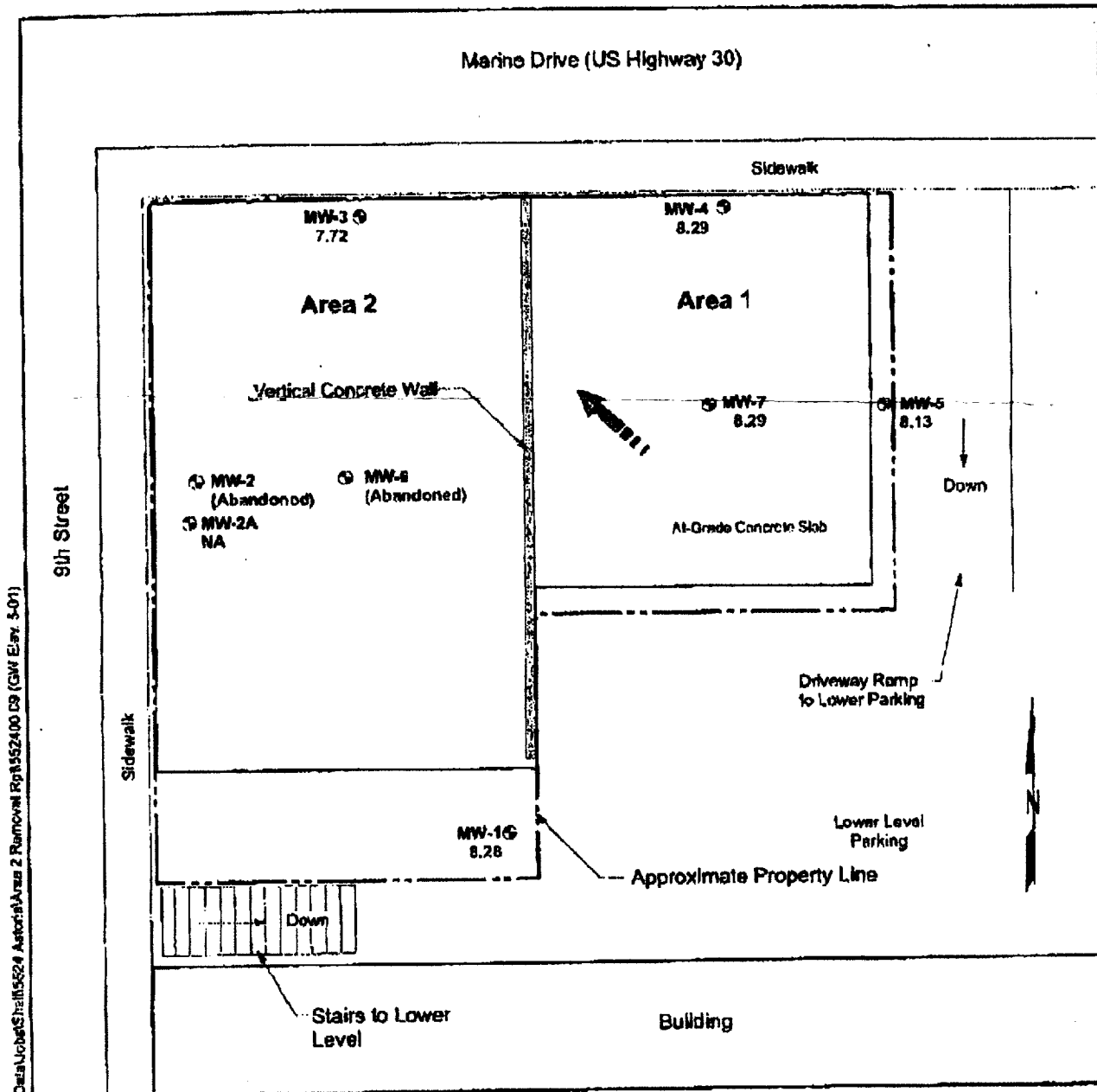
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**WATER RESOURCES DEPT**  
**SALEM, OREGON**

(5) WELL TESTS: NOT PERFORMED  
 Pump     Bailer     Air     Flowing Artesian  
 Permeability \_\_\_\_\_ Yield \_\_\_\_\_ GPM  
 Conductivity \_\_\_\_\_ PH \_\_\_\_\_  
 Temperature of water \_\_\_\_\_ °F/C Depth artesian flow found \_\_\_\_\_ ft.  
 Was water analysis done?  Yes  No  
 By whom? \_\_\_\_\_  
 Depth of strata to be analyzed. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 Remarks: \_\_\_\_\_  
 Name of supervising Geologist/Engineer \_\_\_\_\_

Date started 2/4/05 Completed 2/4/05  
 (unbonded) Monitor Well Constructor Certification:  
 I certify that the work I performed on the construction, 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.  
 Signed \_\_\_\_\_ Date \_\_\_\_\_ MWC Number \_\_\_\_\_

(bonded) Monitor Well Constructor Certification:  
 I accept responsibility for the construction, 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.  
 Signed \_\_\_\_\_ Date 2/8/05 MWC Number 16077

# Groundwater Elevations: May 2001 Former Shell Service Station Site 9th Street and Marine Drive, Astoria, Oregon

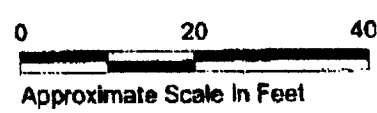


Data Uchida/Shell/5524 Astoria/ Area 2 Removal Rpt/52400 D9 (GW Elev. 5-01)

Note: 1. Base map prepared from on-site reconnaissance by Hart Crowser personnel.

### Legend:

- MW-3 7.72 NA Monitoring Well Location and Designation  
Top of Groundwater in Feet  
Not Available (Well Elevation Not Surveyed)
- ➔ Apparent Groundwater Flow Direction



**HARTCROWSER**  
5524 Figure 9 6/01

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