CLAT 53266

STATE OF OREGON WATER SUPPLY WELL REPORT (as required by ORS 537.765 & OAR 690-205-0210)

10-22-2009

Page 1 of 1

WELL LABEL # L	59021
START CARD#	1007880

Company City of Genthart	(1) LAND OWNER Owner Well I.D. PW # 5	(9) LOCATION OF WELL (legal description)
Address 698 Pacific Way City Gearhant State OR Zip 97138 Conversion Address 698 Pacific Way City Gearhant	First Name Last Name	County Clatsop Twp 6.00 N N/S Range 10.00 W E/W WM
Cay Gerhart		
Conversion Con		A STANDARD PLANT OF THE PROPERTY OF THE PROPER
Conversion Con		
Shell Metanto (repairecondition)		Long 0 Divis of DD
Rotary Are Rotary Mod	Alteration (repair/recondition) Abandonment	(Street address of well (Nearest address
Reverue Rotary Other		8 A 28
(4) PROPOSED USE Domestic Irrigation Community Industrial Commercial Livestock Dewatering Thermal Injection Other		(10) STATIC WATER LEVEL Date SWL(psi) + SWL(ft)
Industrial Commercial Livestock Dewatering Thermal Injection Other		
Thermal		The full distriction of the filler of the fi
(5) BORE HOLE CONSTRUCTION Special Standard Attach copy Depth of Completed Well 117.00 ft. BORE HOLE Dia From To Material From To Annt lbs 16 0 117 Cement 0 75 64 S. How was seal placed: Method A B C D E Backfill placed from ft. to ft. Material Silica Sand Size 10/20 Bore Hole Dia From To Gauge Stl Plate Wid Thrd Stand With Filter pack from 75 ft. to 117 ft. Material Silica Sand Size 10/20 Explosives used: Yes Type Amount Filter pack from 75 ft. to 117 0.375		Flowing Artesian? Dry Hole?
Depth of Completed Well 117,00 ft. SEAL Sacks BORE HOLE Dia From To Material From To Amt Ihs Interest Intere		
BORE HOLE Dia From To Material From To Amt lbs 16 0 117 Cement 0 75 64 8 How was seal placed: Method A B C D E Backfill placed from ft to ft. Material Silica Sand Size 10/20 Explosives used: Yes Type Amount (6) CASING/LINER Casing Liner Dia + From To Gauge Stl Plate Wid Thrd Shoe Inside Outside Other Location of shoe(s) Temp casing Yes Dia From To Material 304 SS Perforations Method Screens Type Spiral Wrap Material 304 SS Perfors Casing/Screen creen Liner Dia From To width length slots pipe size (8) WELL TESTS: Minimum testing time is I hour (9) Pump Bailer Air Flowing Artesian (11) WELL LOG Ground Elevation (12) Waterial Evaluation (13) WELL LOG Ground Elevation (14) WELL LOG Ground Elevation (15) WELL LOG Ground Elevation (14) WELL LOG Ground Elevation (15) WELL LOG Ground Elevation (16) Sand - Gray with seashells, some gravel 55 80 Fine/Med Sand - brown 50 and Ground Elevation (14) WELL LOG Ground Elevation (15) WELL LOG Ground Elevation (16) Sand - Gray with seashells, some gravel 55 80 Fine/Med Sand - brown 50 and Ground Elevation (10) Waterial Evaluation (11) WELL LOG (12) Waterial Evaluation (14) Waterial Evaluation (15) WELL TESTS: Minimum testing time is I hour (16) WELL TESTS: Minimum testing time is I hour (17) WELL TESTS: Minimum testing time is I hour (18) WELL TESTS: Minimum testing time is I hour (19) Waterial Eval		SWL Date From To Est Flow SWL(psi) + SWL(ft)
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How was seal placed: Method A B C D E		
Composition		
How was seal placed: Method A B C D E Other Other Activity placed from Rt to ft. Material Silica Sand Size 10/20 Explosives used: Yes Type Amount Other Amount Other To Gauge Stl Plate Wld Thrd Other Amount Other Amount Other To Gauge Stl Plate Wld Thrd Other Amount Other To Gauge Stl Plate Wld Thrd Other Amount Other Sand - Gray with seashells, some gravel Other Amount Other A	16 (117 Cement U 73 04 5	
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● Pump Bailer Air Flowing Artesian Electronically Filed		the best of my knowledge and belief.
● Pump Bailer Air Flowing Artesian Electronically Filed	(8) WELL TESTS: Minimum testing time is 1 hour	License Number 1702 Date 10-22-2009
		Electronically Filed
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr) Signed RUSTY R OTTO (E-filed)		Signed RUSTY R OTTO (E-filed)
200 69.7 75 24 (bonded) Water Well Constructor Certification		(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 wor	NT NT	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
water quality concerns?		•
From To Description Amount Units License Number 1523 Date 10-22-2009 Electronically Filed	Profit to Description Amount Onts	
Signed ROBERT STADELI (E-filed)		
Contact Info (optional)		