

STATE OF OREGON WATER SUPPLY WELL REPORT

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

10-22-2009

WELL LABEL # L 59030

START CARD # 1007877

(1) LAND OWNER Owner Well I.D. PW #14

First Name Last Name Company City of Gearhart Address 698 Pacific Way City Gearhart State OR Zip 97138

(2) TYPE OF WORK [X] New Well [] Deepening [] Conversion [] Alteration (repair/recondition) [] Abandonment

(3) DRILL METHOD [] Rotary Air [] Rotary Mud [] Cable [] Auger [] Cable Mud [X] Reverse Rotary [] Other

(4) PROPOSED USE [] Domestic [] Irrigation [X] Community [] Industrial/ Commercial [] Livestock [] Dewatering [] Thermal [] Injection [] Other

(5) BORE HOLE CONSTRUCTION Special Standard [] Attach copy

Depth of Completed Well 159.00 ft.

Table with columns: Dia, From, To, Material, SEAL, Amt, lbs. Row 1: 10, 0, 159, Cement, 0, 93.25, 63, S

How was seal placed: Method [] A [] B [X] C [] D [] E

Backfill placed from 93.25 ft to 159 ft. Material Silica Sand Size 10/20

Explosives used: [] Yes Type Amount

(6) CASING/LINER

Table with columns: Casing, Liner, Dia, From, To, Gauge, Stl, Plstc, Wld, Thrd. Row 1: 10, 2.5, 95, 0.375, [X]

Shoe [] Inside [] Outside [] Other Location of shoe(s) Temp casing [] Yes Dia From To

(7) PERFORATIONS/SCREENS

Perforations Method Screens Type Spiral Wrap Material 304 SS

Table with columns: Perf/S, Casing/Screen, Dia, From, To, Sern/slot width, Slot length, # of slots, Tele/pipe size. Row 1: Screen, 10, 95, 125, .02

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

Table with columns: Pump, Bailer, Air, Flowing Artesian, Yield gal/min, Drawdown, Drill stem/Pump depth, Duration (hr). Row 1: 200, 74.5, 89, 24

Temperature 53 °F Lab analysis [X] Yes By Consultant

Table with columns: From, To, Description, Amount, Units

(9) LOCATION OF WELL (legal description)

County Clatsop Twp 6.00 N N/S Range 10.00 W E/W WM Sec 4 SW 1/4 of the SE 1/4 Tax Lot 100

6th Ave and Marion Street, Gearhart, Oregon

(10) STATIC WATER LEVEL

Table with columns: Existing Well / Predeepening, Date, SWL(psi), SWL(ft). Row 1: Completed Well, 09-18-2009, 21.8

WATER BEARING ZONES Depth water was first found 10'

Table with columns: SWL Date, From, To, Est Flow, SWL(psi), SWL(ft). Row 1: 09-12-2009, 20, 131, 200, 20

(11) WELL LOG

Table with columns: Material, From, To. Includes 'RECEIVED' and 'MAR 25 2010' stamps.

Date Started 09-04-2009 Completed 10-21-2009

(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.

License Number 1702 Date 10-22-2009 Electronically Filed Signed RUSTY ROTTO (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.

License Number 1523 Date 10-22-2009 Electronically Filed Signed ROBERT STADELI (E-filed) Contact Info (optional)

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

10-22-2009

WELL LABEL # L 59030

START CARD # 1007877

(1) LAND OWNER Owner Well I.D. PW #14

First Name _____ Last Name _____
 Company City of Gearhart
 Address 698 Pacific Way
 City Gearhart State OR Zip 97138

(2) TYPE OF WORK New Well Deepening Conversion
 Alteration (repair/recondition) Abandonment

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable Auger Cable Mud
 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 159.00 ft.

BORE HOLE			SEAL				sacks/
Dia	From	To	Material	From	To	Amt	lbs
10	0	159	Cement	0	93.25	63	S

How was seal placed: Method A B C D E

Backfill placed from _____ ft. to _____ ft. Material _____
 Filter pack from 93.25 ft. to 159 ft. Material Silica Sand Size 10/20

Explosives used: Yes Type _____ Amount _____

(6) CASING/LINER

Casing	Liner	Dia	From	To	Gauge	Stl	Plstc	Wld	Thrd
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	10	3.5	102	0.375	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	10	125	130.7	0.375	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		154	159		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Shoe Inside Outside Other Location of shoe(s) _____

Temp casing Yes Dia _____ From _____ To _____

(7) PERFORATIONS/SCREENS

Perforations Method _____
 Screens Type Spiral Wrap Material 304 SS

Perf/S	Casing/	Screen	Dia	From	To	Scrns/slot	Slot	# of	Tele/
	Liner					width	length	slots	pipe size
Screen	10	95	125	0.02					
Screen	10	102	154	0.035					

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
200	74.5	89	24
	81.8	94	

Temperature 53 °F Lab analysis Yes By Consultant

Water quality concerns? Yes (describe below)

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County Clatsop Twp 6.00 N N/S Range 10.00 W E/W WM
 Sec 4 SW 1/4 of the SE 1/4 Tax Lot 100
 Tax Map Number _____ Lot _____
 Lat _____ " or _____ DMS or DD
 Long _____ " or _____ DMS or DD
 Street address of well Nearest address

6th Ave and Marion Street, Gearhart, Oregon

(10) STATIC WATER LEVEL

Existing Well / Predeepening	Date	SWL(psi)	+ SWL(ft)
Completed Well	09-18-2009		218.23

Flowing Artesian? Dry Hole?

WATER BEARING ZONES

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
09-12-2009	20	131	200		20.25

(11) WELL LOG

Material	From	To
Med / Coarse Fine sand	0	69
Med / Coarse Fine sand w/ wood and organics	69	71
Sandy silt	71	75
Gravelly sand	75	92
Fine/ Med sand	92	124
Gravelly Fine / medium sand	124	159
Very dense silty clay - Gray	159	159

RECEIVED
NOV 02 2009
WATER RESOURCES DEPT
SALEM, OREGON

Date Started 09-04-2009 Completed 10-21-2009

(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 1702 Date 10-22-2009

Electronically Filed

Signed RUSTY R OTTO (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 1523 Date 10-22-2009

Electronically Filed

Signed ROBERT STADELI (E-filed)

Contact Info (optional)