COLU 52200

STATE OF OREGON Water Supply Well Report (as required by ORS 537.765)

Depth of strata:

COLU

Received Date: 02-06-2003

Well ID Tag # L 57271

7 1 ay # L 3/2/1

Start Card # 147379

IIISH UCHONS I	or comp	eurg uns rep	OIL ale OII	tile last pe	ige or irris	IUIIII.									
(1) Owner Well Number: 5								(9) Location of Hole by legal description							
Name:							County: C	OLU		Latitude:		Longitud	le:		
WARREN W			N				Township:	4.00 N		Range: 2	2.00 W				
Street: POB		ı	0,4	-4 OD	7: OI	07054	Section: 23	NWNW		Lot:		Block:			
	ELENS		- ડા	ate:OR	Zip Code:	97051	Tax Lot: 30	00		Subdivisio	n:				
(2) Type of Work								ess of Well (,				
X New Alter (Recondition) Alter (Repair)								PROPERTY DUE WEST OF 32080 CHURCH ROAD							
Deepening Abandonment							MAP, with location identified, must be attached.								
(3) Drill Method								atic Wat	er Le	vel					
X Rotary Air Rotary Mud Cable Auger Other:								land surface	196.0	0	Date: 01	/ 15 / 200	3		
								essure:			Date:				
(4) Proposed Use								tor Roa	rina	70nos					
· ·								i<i>ter Bea</i> ich water wa	_		138.00 ft.				
Domestic X Community Industrial Irrigation Injection									st Flow	swl	100.00 11.				
Livestock Thermal Other:								140	12	95					
(5) Bore Hole Construction							285	288	18	138					
Special Standards: Depth of completed well: 601.00 ft.								390	30	138					
Explosives Used: Amount: Type:								ell Log	(Ground E	levation:				
	Hole				Seal		Mate	erial				From	То	swl	
Diameter	From	То	Mtrl	From	То	Sacks/lbs	BROWN S	ILTY CLAY				0	3		
12	0	203	ВС	0	18	13	RED CLAY	(3	20		
8	203	665	BG	18	197	23	ORANGE (CLAY				20	38		
			CE	197	203	3	BROWN C	LAY & SILT				38	60		
			OL.	107	200	ŭ	BROWN C	LAY & WEA	THERE	D BASAL	Т	60	110		
How was sea	l placed	? C	Other:	POURE)		MULTICO	LORED WEA	ATHERE	D BASAL	т.	110	122		
Back fill place					Materia	al:	GRAY CR	EVICED BAS	SALT			122	138		
Filter pack fro	om:				Size:		GRAY BR	OKEN BASA	LT			138	140	95	
(6) Casii	na / L	iner					GRAY CR	EVICED BAS	SALT			140	198		
Csng/						Shoe Shoe	GRAY BAS					198	203		
Liner Diam		rom To		•	Weld TI			EVICED BAS				203	285		
C 8		2 20			X	202 Out		OKEN BASA				285	288	138	
L 6	5	8 58	9 .250) S	Χ			ROWN CRE				288	372		
								YELLOW W				372	374	400	
							-1	LORED BRO				374	390	138	
(7) Perfo	oratio	n / Scre	ens					ROWN CRE				390 419	419 428		
Perforations: Csng/ Mtrl From To Width Height #Slots Dia. t/pSize Lnr Method								LCANIC TUR		CAVERIN		419	426 455		
Mtrl From S 271	То 272			is Dia. i/	Joize <u>Lni</u>			REEN BAS				455	470		
Screens:	212	3.200 0	3			SAW CUT		ROWN BAS				470	555		
Mtrl From	То	S Size #	Slots D	ia. t/pSiz	е Туре	Gauge		ROWN BRO		TIASA		555	563	138	
								ROWN BAS		AGALI		563	655	100	
(8) Well	Tosts	(Minimu	m testing	time is o	ne hour)			LORED SAN		=		655	660		
			- 01					d: 10 / 21 /			Date Compl			13	
Type Yiel A 80.0				n at D 00	uration 1.00						·	eted. VI	24 / 200		
A 60.	00 G	l	·	00	1.00		1.) Water Well the work I pe				eration or a	handoni	ment	
							of this well is	s in complian	ce with 0	Dregon we	ll construct	ion standaı	ds. Mate	erials	
							used and inf Signed by:	ormation rep	orted abo	ove are tru	e to the bes	st knowledg WWC	•	elief.	
Temperature of Water: 54.00 F								lator Mall C	onetruct	or Contif	cation:	VVVV	<i>π</i> .		
Was water analysis done? X Depth of artesian flow:							1 -	later Well Consibilty for				abandonm	ent work		
by whom? LABORATORY Did any strata contain water unsuitable for use?							performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon well construction								
Did any strata contain water unsuitable for use? Too Little Salty								uring this tim This report is							
Muddy Odor Colored other:								THOMAS F			,	-	 . #· 167	9	

Phone: 503-543-8383

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Start Card #

(as required by ORS 537.765) Instructions for completing this report are on the last page of this form.

(1) Owner (9) Location of Hole by legal description Well Number: Name: Latitude: County: Township: Range: Street: Section: Lot: Block: City: State: Zip Code: Tax Lot: Subdivision: (2) Type of Work Street Address of Well (or nearest address): New Alter (Recondition) Alter (Repair) Deepening Abandonment MAP, with location identified, must be attached. (3) Drill Method (10) Static Water Level Feet below land surface: Date: Rotary Air Rotary Mud Cable Auger Artesian Pressure: Date: Other: (4) Proposed Use (11) Water Bearing Zones Depth at which water was first found: Domestic | Community | Industrial | Irrigation | Injection From То est Flow swl Livestock Thermal 555 563 30 138 (5) Bore Hole Construction Special Standards: Depth of completed well: **Ground Elevation:** (12) Well Log Explosives Used: Amount: Type: Material From То swl Hole Seal **GRAY SANDSTONE** 660 665 Diameter From То Mtrl From То Sacks/lbs CE 601 640 20 How was seal placed? Other: Back fill placed from: Material: Filter pack from: Size: (6) Casing / Liner Csna/ Shoe Shoe Liner Diameter From То Gauge Mtrl Weld Thrd (7) Perforation / Screens Perforations: Csng/ Width Height #Slots Dia t/pSize Lnr Mtrl From То Method s 288 289 0.250 8.00 3 **SAW CUT** Screens: Mtrl From То S Size #Slots Dia. t/pSize Type Gauge (Minimum testing time is one hour) (8) Well Tests Date Started: Date Completed: Yield Drawdown Type Units Stem at Duration (unbonded) Water Well Constructor Certification: I certify that the work I perform on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Materials used and information reported above are true to the best knowledge and belief. Signed by: WWC #: Temperature of Water: (bonded) Water Well Constructor Certification: Was water analysis done? Depth of artesian flow: accept responsibilty for the constuction, alteration, or abandonment work performed on this well during the construction dates reported above. All work Did any strata contain water unsuitable for use? performed during this time is in compliance with Oregon well construction Too Little standards. This report is true to the best of my knowledge and belief. Odor Colored other: Signed by: WWC#: Depth of strata: Phone: Page 2 of 3

STATE OF OREGON **Water Supply Well Report**

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

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(1) Owner Well Number:	(9) Location of Hole by legal description							
Name:	County: Latitude: Longitude:							
Ohrent	Township: Range:							
Street: City: State: Zip Code:	Section: Lot: Block:							
· · · · · · · · · · · · · · · · · · ·	Tax Lot: Subdivision:							
(2) Type of Work New Alter (Recondition) Alter (Repair)	Street Address of Well (or nearest address):							
Deepening Abandonment	MAD with to offer the Min to the dead							
	MAP, with location identified, must be attached.							
(3) Drill Method	(10) Static Water Level							
Rotary Air Rotary Mud Cable Auger	Feet below land surface: Date:							
Other:	Artesian Pressure: Date:							
(4) Proposed Use	(11) Water Bearing Zones							
Domestic Community Industrial Irrigation Injection	Depth at which water was first found:							
Livestock Thermal Other:	From To est Flow swl							
(5) Bore Hole Construction								
Special Standards: Depth of completed well:								
Explosives Used: Amount: Type:	(12) Well Log Ground Elevation:							
Hole Seal	Material From To swl							
Diameter From To Mtrl From To Sacks/lk								
Diamotor From To Suchonia								
How was seal placed? Other:								
Back fill placed from: Material:								
Filter pack from: Size:								
(6) Casing / Liner								
Csng/ Shoe S Liner Diameter From To Gauge Mtrl Weld Thrd at u	.1							
Liner Diameter From To Gauge Mtrl Weld Thrd at u	Sed							
(7) Perforation / Screens								
Perforations: Csng/								
Mtrl From To Width Height #Slots Dia. t/pSize Lnr Method	<u> </u>							
S 548 588 0.250 8.00 50 L SAW CU	Т							
Screens: Mtrl From To S Size #Slots Dia. t/pSize Type Gauge								
That I form to delet works but applied Type dauge								
(8) Well Tests (Minimum testing time is one hour)	\dashv							
(b) Well rests	Date Started: Date Completed:							
Type Yield Units Drawdown Stem at Duration	'							
	(unbonded) Water Well Constructor Certification: I certify that the work I perform on the construction, alteration, or abandonment							
	of this well is in compliance with Oregon well construction standards. Materials							
	used and information reported above are true to the best knowledge and belief. Signed by: WWC #:							
Temperature of Water:	(bonded) Water Well Constructor Certification:							
Was water analysis done? Depth of artesian flow:	I accept responsibilty for the construction, alteration, or abandonment work							
by whom? Did any strata contain water unsuitable for use? Too Little Sali	performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon well construction							
	standards. This report is true to the best of my knowledge and belief.							
_ ,	Signed by: WWC #:							
Depth of strata:	Phone:							