

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

WELL LABEL # L 106919
START CARD # 207860

(1) LAND OWNER Owner Well I.D.
First Name Last Name
Company KRS Enterprises Inc. dba The Wayside
Address 50316 Columbia River Hwy.
City Scappoose State OR Zip 97056

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

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

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

(5) BORE HOLE CONSTRUCTION Special Standard [] (Attach copy)
Depth of Completed Well N/A ft.

Table with columns: Dia, From, To, Material, SEAL, From, To, Amt, sacks/lbs

How was seal placed: Method [] A [] B [] C [] D [] E
Backfill placed from ft. to ft. Material
Filter pack from ft. to ft. Material Size
Explosives used: [] Yes Type Amount

(6) CASING/LINER table with columns: Casing, Liner, Dia, From, To, Gauge, Stl, Plstc, Wld, Thrd

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

(7) PERFORATIONS/SCREENS
Perforations Method
Screens Type Material

Table with columns: Perf/S, Casing/Screen, Dia, From, To, Scrm/slot width, Slot length, # of slots, Tele/pipe size

(8) WELL TESTS: Minimum testing time is 1 hour
[] Pump [] Bailer [] Air [] Flowing Artesian
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)

Table with columns: Temperature, Lab analysis, Water quality concerns, From, To, Description, Amount, Units

(9) LOCATION OF WELL (legal description)
County COLUMBI/ Twp 3 N N/S Range 2 W E/W WM
Sec 24 NE 1/4 of the NW 1/4 Tax Lot 00500
Tax Map Number Lot
Lat Long
[] Street address of well [] Nearest address
50316 Columbia River Hwy., Scappoose, Or 97056

(10) STATIC WATER LEVEL table with columns: Date, SWL(psi), SWL(ft), Existing Well / Predeepening, Completed Well, Flowing Artesian?, Dry Hole?

(11) WELL LOG Ground Elevation
Material From To
6" Casing Extended on the existing well casing
Original seal not disturbed.
RECEIVED
OCT 14 2011
WATER RESOURCES DEPT
SALEM, OREGON

Date Started 09-27-2011 Completed 09-27-2011

(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
Password: (if filing electronically)
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 1266 Date 09-28-2011
Password: (if filing electronically)
Signed
Contact Info (optional)