

STATE OF OREGON

WATER SUPPLY WELL REPORT

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

07-24-2008

WELL LABEL # L 64977

START CARD # 1004224

(1) LAND OWNER Owner Well I.D. _____

First Name GLEN Last Name BUTLER
Company
Address 11835 SW EBBERTS CT
City BEAVERTON State OR Zip 97008

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

(3) DRILL METHOD

[X] Rotary Air [] Rotary Mud [] Cable [] Auger [] Cable Mud
[] Reverse Rotary [] Other

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

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

Depth of Completed Well 445.00 ft.

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

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

[] Other

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 _____

Perf/S Casing/ Screen Dia From To Scrn/slot width Slot length # of slots Tele/ pipe size

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

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

[] Pump [] Bailer [X] Air [] Flowing Artesian

Table with columns: Yield gal/min, Drawdown, Drill stem/Pump depth, Duration (hr)

Temperature 72 °F Lab analysis [] Yes By _____

Water quality concerns? [] Yes (describe below)

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

(9) LOCATION OF WELL (legal description)

County Crook Twp 17.00 S N/S Range 22.00 E E/W WM
Sec 7 SW 1/4 of the NE 1/4 Tax Lot 600
Tax Map Number Lot
Lat ' " or DMS or DD
Long ' " or DMS or DD
[] Street address of well [] Nearest address

GLEN RANCH
PAULINA, OREGON

(10) STATIC WATER LEVEL

Table with columns: Date, SWL(psi), +, SWL(ft)

Flowing Artesian? [] Dry Hole? []

WATER BEARING ZONES Depth water was first found

Table with columns: SWL Date, From, To, Est Flow, SWL(psi), +, SWL(ft)

(11) WELL LOG

Table with columns: Material, From, To, Ground Elevation

Date Started 07-22-2008 Completed 07-23-2008

(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 1880 Date 07-24-2008
Electronically Filed
Signed JAMES H WILLIAMS (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 584 Date 07-24-2008
Electronically Filed
Signed DARRELL MAPHET (E-filed)
Contact Info (optional)