

NEVER

JUN 30 1997

WELL I.D.# 607933

STATE OF OREGON
WATER SUPPLY WELL REPORT WATER RESOURCES DEPT.
(as required by ORS 537.765) SALEM, OREGON

(START CARD) # 93345

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

(1) OWNER: Douglas Enterprises Well Number _____
Name Douglas Enterprises
Address 4251 A State St.
City Ontario State Ca. Zip 91764

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

(3) DRILL METHOD:
☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger
☐ Other

(4) PROPOSED USE:
☒ Domestic ☐ Community ☐ Industrial ☐ Irrigation
☐ Thermal ☐ Injection ☐ Livestock ☐ Other

(5) BORE HOLE CONSTRUCTION:
Special Construction approval ☐ Yes ☒ No Depth of Completed Well 248 ft.
Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
			<u>N/A</u>			

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E
☐ Other

Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from 248 ft. to 4 ft. Size of gravel 3/4" to 1"

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:	<u>4"</u>	<u>+2'</u>	<u>98"</u>	<u>100%</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<u>4"</u>	<u>108"</u>	<u>208"</u>	<u>100%</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
<u>98"</u>	<u>108"</u>	<u>.010</u>		<u>4"</u>		<input type="checkbox"/>	<input checked="" type="checkbox"/>
<u>208"</u>	<u>248"</u>	<u>.010</u>		<u>4"</u>		<input type="checkbox"/>	<input checked="" type="checkbox"/>

(9) LOCATION OF WELL by legal description:
County Douglas Latitude N 43° 19.420 Longitude W 123° 02.608
Township 26S N or S Range 3W E or W. WM.
Section 10 1/4 1/4
Tax Lot 200 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 22284 Northumpqua Hwy. Idlewild Park, OR.

(10) STATIC WATER LEVEL:
70 ft. below land surface. Date 6-17-97
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL
	<u>N/A</u>		

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
<u>Pulled 4" PVC Perforated Liner and replaced with 4" PVC Liner and screens.</u>			

Date started 6-16-97 Completed 6-17-97

(unbonded) Water Well Constructor Certification:
I certify that the work I performed on the construction, 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.

Signed _____ WWC Number _____ Date _____

(bonded) Water Well Constructor Certification:
I accept responsibility for the construction, 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.

Signed Steve H. Moore WWC Number 629 Date 6-17-97