

STATE OF OREGON
WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

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

DOUG
53991

(WELL I.D.)# L 77233

(START CARD) # 171125

(1) OWNER: Well Number **2A**

Name **Norway Development**

Address **PO Box 387**

City **Oregon City** State **OR** Zip **97045**

(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 **123** ft.

Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
10"	0	39	Bentonite	0	39	14 sacks
6"	39	165				

How was seal placed: Method A B C D E

Other **poured dry**

Backfill placed from _____ ft. to _____ ft. Material _____

Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Casing/Liner	Diameter	From	To	Gauge	Material			
					Steel	Plastic	Welded	Threaded
Casing:	6"	+1	39	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:	4"	5	165	.160	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) **39 ft.**

(7) PERFORATIONS/SCREENS:

Perforations Method **saw cut**

Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
70	150	1/8x5	96	4"		<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Pump Bailer Air Flowing Artesian

Yield gal/min **20** Drawdown _____ Drill stem at **160** Time **1 hr.**

Temperature of water **52** Depth Artesian Flow Found _____

Was a water analysis done? Yes By whom _____

Did any strata contain water not suitable for intended use? Too little

Salty Muddy Odor Colored Other _____

Depth of strata: _____

(9) LOCATION OF WELL by legal description:

County **Douglas** Latitude _____ Longitude _____

Township **26 S** Range **5 W** WM.

Section **31 SW** 1/4 **SW** 1/4

Tax Lot **1300** Lot _____ Block _____ Subdivision _____

Street Address of Well (or nearest address) **Kenneth Ford Dr**

Roseburg, OR

(10) STATIC WATER LEVEL:

70 ft. below land surface. Date **5/20/05**

Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found **216 ft.**

From	To	Estimated Flow Rate	SWL
139	141	20	70

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
Brown clay	0	18	
Blue clay	18	22	
Blue claystone (soft)	22	139	
Blue claystone (broken)	139	141	70
Marine basalt	141	165	

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JUN 16 2005

WATER RESOURCES DEPT RECEIVED
SALEM, OREGON

AUG 12 2005

WATER RESOURCES DEPT
SALEM, OREGON

Date started **5/19/05** Completed **5/20/05**

(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.

WWC Number _____

Signed _____ 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.

WWC Number **1284**

Signed _____ Date **5/27/05**

Doug 5377

STATE OF OREGON WATER SUPPLY WELL REPORT (as required by ORS 537.765)

(WELL I.D.)# L 77233

(START CARD) # 171125

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

Amend *

(1) OWNER: Well Number 2A Name Norway Development Address PO Box 387 City Oregon City State OR Zip 97045

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

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

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

(5) BORE HOLE CONSTRUCTION: Special Construction approval [] Yes [X] No Depth of Completed Well 405 ft. Explosives used [] Yes [X] No Type Amount

Table with columns for HOLE Diameter, From, To, Material, and SEAL From, To, Sacks or pounds. Includes data for 10" and 6" diameters.

How was seal placed: Method [] A [] B [] C [] D [] E [X] Other poured dry Backfill placed from 0 ft. to 39 ft. Material Gravel placed from 39 ft. to 165 ft. Size of gravel

(6) CASING/LINER: Table with columns for Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Includes data for 6" casing and 4" liner.

Final location of shoe(s) 39 ft.

(7) PERFORATIONS/SCREENS: Table with columns for From, To, Slot size, Number, Diameter, Material, Casing, Liner. Includes data for 70-150 ft. range.

(8) WELL TESTS: Minimum testing time is 1 hour [] Pump [] Bailer [X] Air [] Artesian Yield gal/min 20 Drawdown Drill stem at 160 Time 1 hr.

Temperature of water 52 Depth Artesian Flow Found Was a water analysis done? [] Yes By whom Did any strata contain water not suitable for intended use? [] Too little [] Salty [] Muddy [] Odor [] Colored [] Other Depth of strata:

(9) LOCATION OF WELL by legal description: County Douglas Latitude Longitude Township 28 S Range 5 W WM Section 31 SW 1/4 SW 1/4 Tax Lot 1300 Lot Block Subdivision Street Address of Well (or nearest address) Kenneth Ford Dr Roseburg, OR

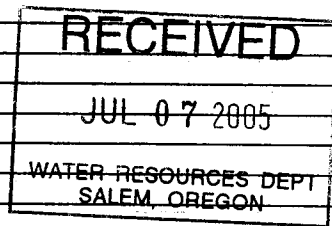
(10) STATIC WATER LEVEL: 70 ft. below land surface. Date 5/20/05 Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES: Depth at which water was first found 216 ft.

Table with columns: From, To, Estimated Flow Rate, SWL. Includes data for 139-141 range with flow rate 20 and SWL 70.

(12) WELL LOG: Ground Elevation

Table with columns: Material, From, To, SWL. Includes entries for Brown clay, Blue clay, Blue claystone (soft), Blue claystone (broken), and Marine basalt.



Date started 5/19/05 Completed 5/20/05

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Signed Date WWC Number

(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 Date 5/27/05 WWC Number 1284

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STATE OF OREGON
WATER SUPPLY WELL REPORT
 (as required by ORS 537.765)

(WELL I.D.)# L **77233**

(START CARD) # **171125**

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

(1) OWNER: Well Number **2A**
 Name **Norway Development**
 Address **PO Box 387**
 City **Oregon City** State **OR** Zip **97045**

(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 **405** ft.
 Explosives used Yes No Type _____ Amount _____

HOLE			SEAL				
Diameter	From	To	Material	From	To	Sacks or pounds	
10"	0	39	Bentonite	0	39	14 sacks	
6"	39	165					

How was seal placed: Method A B C D E
 Other **poured dry**
 Backfill placed from _____ ft. to _____ ft. Material _____
 Gravel placed from _____ ft. to _____ ft. Size of gravel _____

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	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
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Liner:	4"	5	165	.160	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) **39 ft.**

(7) PERFORATIONS/SCREENS:

Perforations Method **saw cut**
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele./pipe size	Casing	Liner
70	150	1/8x5	96	4"		<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
20		160	1 hr.

Pump Bailer Air Flowing Artesian

Temperature of water **52** Depth Artesian Flow Found _____
 Was a water analysis done? Yes By whom _____
 Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
 Depth of strata: _____

(9) LOCATION OF WELL by legal description:
 County **Douglas** Latitude _____ Longitude _____
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 Section **31 SW** 1/4 **SW** 1/4
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(10) STATIC WATER LEVEL:
70 ft. below land surface. Date **5/20/05**
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found **216 ft.**

From	To	Estimated Flow Rate	SWL
139	141	120	70

(12) WELL LOG:
 Ground Elevation _____

Material	From	To	SWL
Brown clay	0	18	
Blue clay	18	22	
Blue claystone (soft)	22	139	
Blue claystone (broken)	139	141	70
Marine basalt	141	165	

RECEIVED

JUN 16 2005

WATER RESOURCES DEPT
 SALEM, OREGON

Date started **5/19/05** Completed **5/20/05**

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 WWC Number **1284**
 Signed _____ Date **5/27/05**