

Amended

RECEIVED HOOD 50179

STATE OF OREGON JAN 10 2001 WATER SUPPLY WELL REPORT

WELL I.D. # L 33816 START CARD # W-126896

(as required by ORS 537.765) WATER RESOURCES DEPT Instructions for completing this report are on the back page of this form.

(1) OWNER: Well Number HOOD RIVER SAND, GRAVEL & RED-MIX INC. Name Address 2630 OLD COLUMBIA RIVER RD. City HOOD RIVER State OR Zip 97031

(9) LOCATION OF WELL by legal description: County HOOD RIVER Latitude Longitude Township 3N N or S Range 11 E E or W. WM. Section 30 SW 1/4 SW 1/4 Tax Lot 700 Lot Block Subdivision Street Address of Well (or nearest address) 2630 OLD COLUMBIA R RD., HOOD RIVER, OR

(2) TYPE OF WORK (AMENDMENT) (SEE #10) New Well Deepening Alteration (repair/recondition) Abandonment

(10) STATIC WATER LEVEL: 25 ft. below land surface. Date 01/04/01 Artesian pressure lb. per square inch. Date

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

(11) WATER BEARING ZONES: Depth at which water was first found 20/80

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

(5) BORE HOLE CONSTRUCTION: Special Construction approval Yes No Depth of Completed Well 220 ft. Explosives used Yes No Type Amount

Table with 4 columns: From, To, Estimated Flow Rate, SWL. Data rows: 80-172 (20 cpm, 25), 172-220 (100+ cpm, 25)

Table with 7 columns: Diameter, From, To, Material, From, To, Sacks or pounds. Content: SEAL NOT DISTURBED

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

(12) WELL LOG: Ground Elevation

Table for CASING/LINER with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Content: NO CHANGING OF CASING OR LINER

Table for WELL LOG with columns: Material, From, To, SWL. Data rows: Brown basalt, very broken (0-42, 18'), Black basalt, very frac. (42-65), Black basalt, occ. frac. (65-105, 25'), Gray-black basalt, hard, CREVICED (105-135), Gray, brown, & red basalt interbeds (135-150), Gray-black & gray-brown basalt, occ. broken (150-172), Gray-brown basalt, broken, occ. very broken (172-220, 25')

Final location of shoe(s) (7) PERFORATIONS/SCREENS: Perforations Method Screens Type Material

NOTE: STATIC WATER LEVEL CORRECTION: 11/13/00 measured by surveyor (see data attached) 01/04/01 measured, same data results

Table for PERFORATIONS/SCREENS with columns: From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner. Content: NO CHANGES

(8) WELL TESTS: Minimum testing time is 1 hour Pump Bailer Air Flowing Artesian Yield gal/min Drawdown Drill stem at Time

Date started Completed 01/08/01 (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

Temperature of water 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:

(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 573 Signed Date 01/08/01

OCT 14 1999 HOOD 50179

STATE OF OREGON WATER SUPPLY WELL REPORT WATER RESOURCES DEPT. SALEM, OREGON

WELL I.D. # L33816 START CARD # W-126896

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

(1) OWNER: HOOD RIVER SAND, GRAVEL, & REDT-MIX INC. Address: 2630 OLD COLUMBIA RIVER RD. City: HOOD RIVER, State: OR Zip: 97031

(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 [X] Industrial [] Irrigation [] Thermal [] Injection [] Livestock [] Other

(5) BORE HOLE CONSTRUCTION: Special Construction approval [] Yes [X] No Depth of Completed Well 220 ft. Explosives used [] Yes [X] No Type Amount

Table with columns: HOLE (Diameter, From, To), SEAL (Material, From, To), Sacks or pounds. Rows include CEMENT seals at 0-50 and 60-80 ft depths.

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

Backfill placed from 50 ft. to 60 ft. Material BENTONITE Gravel placed from ft. to ft. Size of gravel

(6) CASING/LINER: Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Rows for Casing (8 inch) and Liner (6 inch).

Final location of shoe(s)

(7) PERFORATIONS/SCREENS: Table with columns: From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner. Method: TORCH SLICES, Material: STEEL.

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

Table for well tests with columns: Yield gal/min, Drawdown, Drill stem at, Time. Rows show results for 120+, 100-120, and 50 gpm yields.

Temperature of water 50°F Depth Artesian Flow Found Was a water analysis done? [X] Yes By whom A.M.I. Did any strata contain water not suitable for intended use? [] Too little [] Salty [X] Muddy [] Odor [] Colored [] Other Depth of strata: 20-42

(9) LOCATION OF WELL by legal description: County HOODRIVER Latitude Longitude Township 3N N or S Range 11E E or W. WM. Section 30 SW 1/4 SW 1/4 Tax Lot 700 Lot Block Subdivision Street Address of Well (or nearest address) 2630 OLD COLUMBIA RIVER RD, HOODRIVER, OR

(10) STATIC WATER LEVEL: 18 ft. below land surface. Date 9/23/99 Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES: Depth at which water was first found 20/80

Table for water bearing zones with columns: From, To, Estimated Flow Rate, SWL. Rows show zones from 80-172 ft and 172-220 ft.

(12) WELL LOG: Ground Elevation

Table for well log with columns: Material, From, To, SWL. Rows describe geological layers like Brn basalt, Blk basalt, Gry-blk basalt, etc.

Date started 9/14/99 Completed 9/23/99

(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.

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.

Signed _____ Date 9/23/99 WWC Number 573

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SEP 28 1999

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

WELL I.D. # L 33816
START CARD # W-126896

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

**WATER RESOURCES DEPT.
SALEM, OREGON**

(1) OWNER: Well Number _____
Name HOOD RIVER SAND, GRAVEL & REDT-MIX INC.
Address 2630 OLD COLUMBIA RIVER RD.
City HOOD RIVER, State OR Zip 97031

(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 220 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
12	0	50	CEMENT	0	50	24 SKS
9	50	80	CEMENT	60	80	2 SKS
7 1/2	80	220				

How was seal placed: Method A B C D E

Other _____
Backfill placed from 50 ft. to 60 ft. Material BENTONITE
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:	8"	+1	80	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:	6"	70	220	188	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

Perforations Method TORCH SLOTS
 Screens Type _____ Material STEEL

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
200	220	1x12	40			<input type="checkbox"/>	<input checked="" type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

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

<input type="checkbox"/> Pump	<input type="checkbox"/> Bailer	<input checked="" type="checkbox"/> Air	Flowing <input type="checkbox"/> Artesian
Yield gal/min	Drawdown	Drill stem at	Time
120+		80	1 hr.
100-120		65	af
50		40	#

Temperature of water 50°F Depth Artesian Flow Found _____
Was a water analysis done? Yes By whom A.M.J.
Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
Depth of strata: 20-42

(9) LOCATION OF WELL by legal description:
County HOODRIVER Latitude _____ Longitude _____
Township 3N N or S Range 11E E or W. WM.
Section 30 SW 1/4 SW 1/4
Tax Lot 700 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address)
2630 OLD COLUMBIA RIVER RD. HOODRIVER, OR

(10) STATIC WATER LEVEL:
18 ft. below land surface. Date 9/23/99
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 20/80

From	To	Estimated Flow Rate	SWL
80	172	20 GPM	18
172	220	100+ GPM	18

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Brn basalt, very broken, (scree) w/clay.	0	42	18'
Blk basalt, very fractured	42	65	
Blk basalt, occ. frags.	65	105	18'
Gry-blk basalt, hard, creviced.	105	135	
Gry, brn & red basalt, interbed.	135	150	
Gry-blk & gry-brn basalt occ. broken.	150	172	
Gry-brn basalt, broken, occ. very broken.	172	220	18'

Date started 9/14/99 Completed 9/23/99

(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 [Signature] WWC Number 573 Date 9/23/99