HOOD 51074

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

WELL I.D. # L 109619
START CARD # 1037684

Instructions for completing this report are on the last page of this form. HOOD 51074

(1) LAND OWNER Well Number TW 2
Name Nestle Corp/Pacific Groundwater
Address 2377 Easr Lake Ave
City Sealte State Wa Zip 98102

(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 TEST well

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

HOLE Diameter	From	To	SEAL Material	From	To	Sacks or pounds
			Cement	0	73	2914 lbs
			24%Bentonite			
			calculated			1410 lbs

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 ____

(6) CASING/LINER:

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐

Drive Shoe used ☐ Inside ☐ Outside ☐ None
Final location of shoe(s) ____

(7) PERFORATIONS/SCREENS:
☐ Perforations Method ____
☐ Screens Type ____ Material ____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						☐	☐
						☐	☐
						☐	☐
						☐	☐

(8) WELL TESTS: Minimum testing time is 1 hour
☐ Pump ☐ Bailer ☐ Air ☐ Flowing Artesian

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

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: ____

(9) LOCATION OF WELL by legal description:
County Hood River Latitude ____ Longitude ____
Township 2N N or S Range 8 E E or W. WM.
Section 5 NE 1/4 SW 1/4
Tax Lot 302 Lot ____ Block ____ Subdivision ____
Street Address of Well (or nearest address) O Cramble Hway Cascade Lock

(10) STATIC WATER LEVEL:
40'2 ft. below land surface. Date 4-18-18
Artesian pressure ____ lb. per square inch Date ____

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

From	To	Estimated Flow Rate	SWL

(12) WELL LOG:
Ground Elevation ____

Material	From	To	SWL
Abandoned 6" well 73 ft			
Star perforator 4 rows			
0 to 51 ft top of screen			
Pressure grouted w/ Portland			
type II cement to land			
surface Cut 6" casing			
off 3 ft below grade			

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Date started 4-19-18 Completed 4-19-18

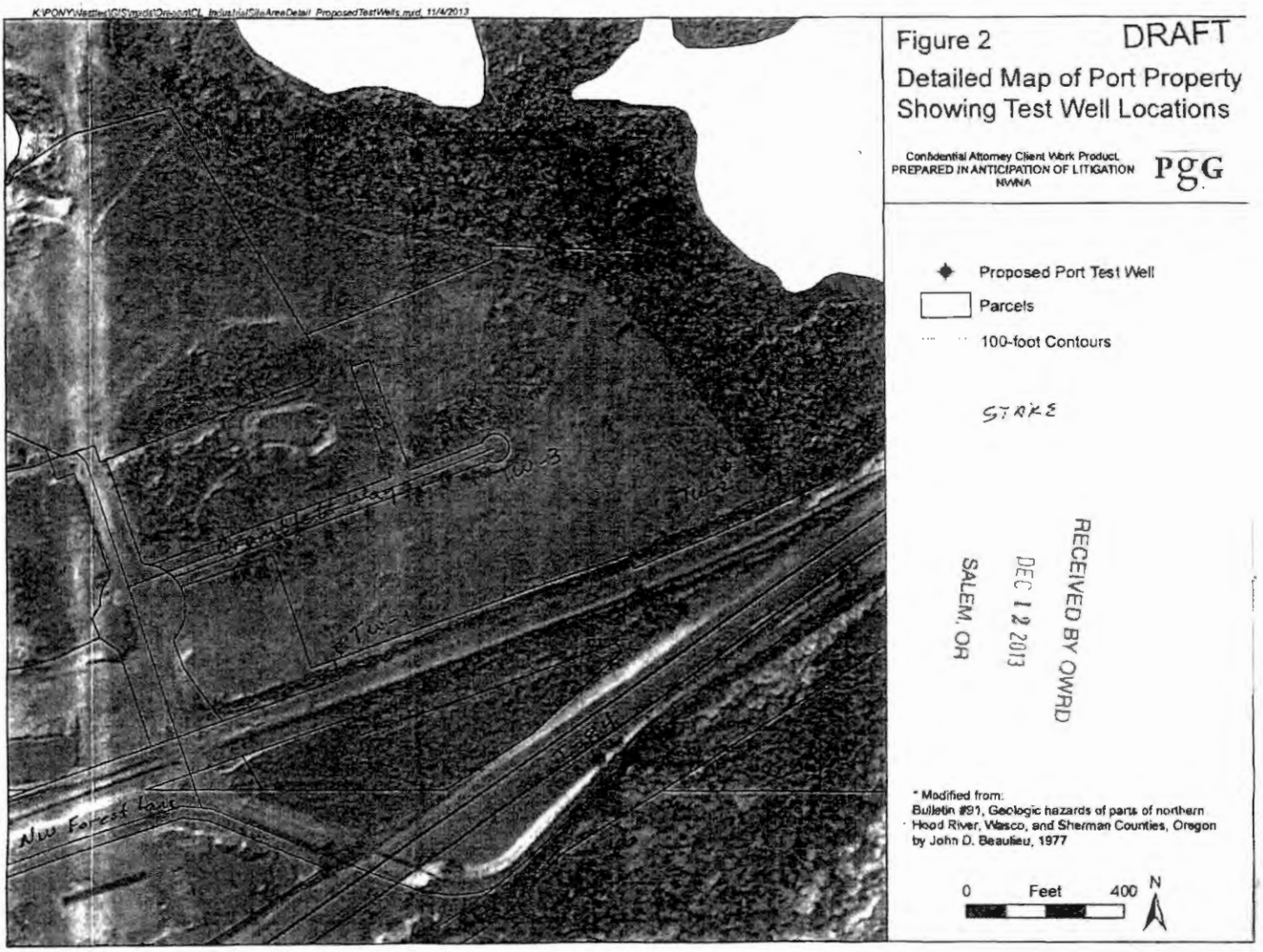
(unbonded) Water Well Constructor Certification:
I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief. Mark Blackburn WWC Number 1920
Signed ____ Date 4-24-18

(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.
Ron Aspaas WWC Number 1445
Signed ____ Date 4-24-18

ORIGINAL – WATER RESOURCES DEPARTMENT FIRST COPY – CONSTRUCTOR SECOND COPY – CUSTOMER

HOOD 51074

HOOD 50850



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