

(1) OWNER/PROJECT:

Name Springfield School District c/o Hatten-Johnson Assoc
 Address 223 W. 12th
 City Eugene State OR Zip 97401

(2) TYPE OF WORK

New Deepening Alteration (repair/recondition) Abandonment

(3) CONSTRUCTION:

Rotary Air Hand Auger Hollow Stem Auger
 Rotary Mud Cable Tool Push Probe Other

(4) TYPE OF HOLE:

Uncased Temporary Cased Permanent
 Uncased Permanent Slope Stability Other

(5) USE OF HOLE: Closed loop heat pump system

(6) BORE HOLE CONSTRUCTION:

Special Construction approval Yes No Depth of Completed Hole 0 ft.

| HOLE | | | SEAL | | | |
|----------|------|-----|-----------|------|----|-----------------|
| Diameter | From | To | Material | From | To | Sacks or pounds |
| 10" | 0 | 25 | cement | 0 | 25 | 20 sacks |
| 6" | 0 | 300 | bentonite | 0 | 30 | 9 sacks |

Backfill placed from _____ ft. to _____ ft. Material _____
 Filter Pack placed from _____ ft. to _____ ft. Size of pack _____

(7) CASING/SCREEN:

| Diameter | From | To | Gauge | SEAL | | | |
|------------|------|-----|-------|-------------------------------------|--------------------------|-------------------------------------|--------------------------|
| | | | | Steel | Plastic | Welded | Threaded |
| Casing: 6" | 0 | 300 | 250 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Perforator | 70 | 100 | | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Screen: | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Slot size 1/4" - 1 15 per foot

(8) WELL TEST:

Pump Bailer Air Flowing Artesian
 Permeability _____ Yield _____ GPM 60+
 Conductivity _____ PH _____
 Temperature of water 56 °F/C Depth artesian flow found _____ ft.
 Was water analysis done? Yes No
 By whom? _____
 Depth of strata analyzed. From _____ ft. to _____ ft.
 Remarks: _____

(9) LOCATION OF HOLE by legal description:

County Lane Latitude _____ Longitude _____
 Township 17S N or S Range 3W E or W. WM. _____
 Section 25 NW 1/4 NW 1/4
 Tax Lot 800 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) Elizabeth Page Elementary School 1300 Hayden Bridge Road Springfield, Oregon

Map with location identified must be attached

(10) STATIC WATER LEVEL:

20 ft. below land surface. Date 2-2-02
 Artesian pressure _____ lb. per square inch. Date _____

(11) SUBSURFACE LOG:

Ground Elevation _____

| Material Description | From | To | SWL |
|----------------------|------|-----|-----|
| topsoil | 0 | 6 | |
| sand, gravel, clay | 6 | 76 | |
| sand, gravel | 76 | 102 | |
| sand, gravel, clay | 102 | 300 | |

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 WATER RESOURCES DEPT.
 SALEM, OREGON
 Date Started 2-2-02 Date Completed 2-4-02

(12) ABANDONMENT LOG:

| Material Description | From | To | Sacks or Pounds |
|-----------------------|------|-----|-----------------|
| 10" borehole cement | 0 | 25 | 20 sacks |
| 6" borehole bentonite | 0 | 30 | 9 sacks |
| Packer at 30 ft. | | | |
| Closed Loop Line | 0 | 300 | |

Date started 2-4-02 Date Completed 2-4-02

Professional Certification

(to be signed by a licensed water supply or monitoring well constructor, or registered geologist or civil engineer).

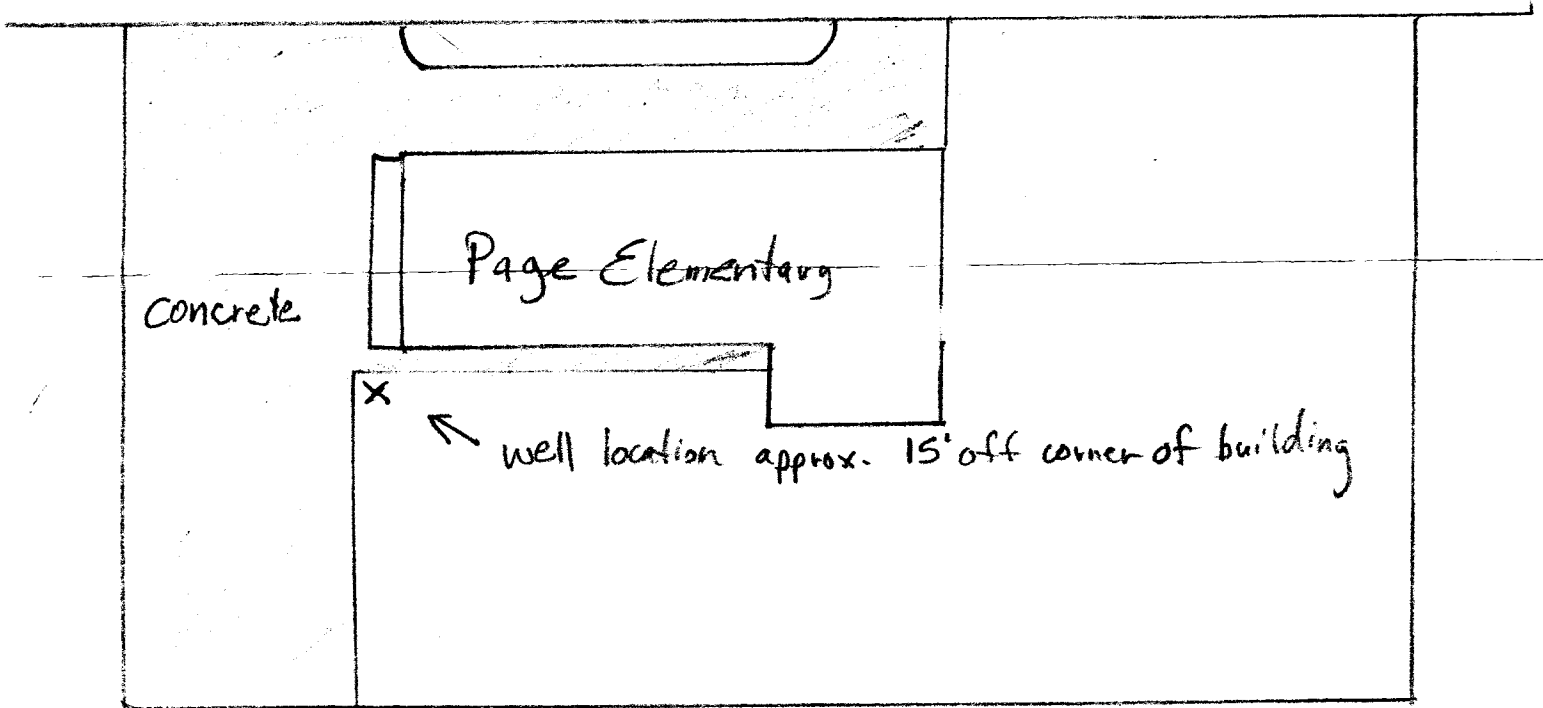
I accept responsibility for the construction, alteration, or abandonment work performed on during the construction dates reported above. All work performed during this time is in compliance with Oregon geotechnical hole construction standards. This report is true to the best of my knowledge and belief.

Signed Casey L. Jones, Jr. License or Registration Number 1541
 Date _____
 Affiliation Casey Jones Well Drilling Co., Inc.
37115 Immigrant Road Pleasant Hill, OR 97455

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK

ORIGINAL & FIRST COPY-WATER RESOURCES DEPARTMENT SECOND COPY-CONSTRUCTOR THIRD COPY-CUSTOMER

Hayden Bridge Rd.



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