MONITORING WELL REPORT

STATE OF OREGON Received Date 5/7/98 LINC 50629 Well Tag# L 18024 (as required by ORS 537.765 & OAR 690-240-095) instructions for completing this report are on the last page of this form. Start Card # 112070 (1) OWNER/PROJECT Well No. 18024 (6) LOCATION OF WELL By legal description Co Job No. 1397 County Lincoln Name Township 9.00S Range 11.00 W Section 8 CITY OF DEPOE BAY; WASTEWATER TREATMENT PLANT SW 1/4 of SW 1/4 of above section. Street 212 SOUTHPOINT ST Legal Desc: City DEPOE BAY State OR Zip 97341 (2) TYPE OF WORK 2. Either Street address of well location SAME **New Construction** Alter (Recondition Alter (Repair) or Tax lot number of well location 608 Conversion Deepening Abandonmen 3. ATTACH MAP WITH LOCATION IDENTIFIED. Map shall include approximate scale and north arrow (3) DRILLING METHOD (7) STATIC WATER LEVEL Rotary Air Rotary Mud ☐ Cable 5.0 Ft. below land surface. Date 4/13/1998 Mollow Stem Auger Other Artesian Pressure lb/sq. in. Date (4) BORE HOLE CONSTRUCTION (8) WATER BEARING ZONES Special Standards 30 ft. Depth of completed well Depth at which water was first found 5 ft. From To Est. Flow Rate SWL Vault Casing Diameter Liner ft. n Material Welded Glued Diameter From To Gauge Threaded TO 1.00 PL X ft. (9) WELL LOG Monument Ground elevation ft. ft. Material From To SWL SANDY GRAVELS TO SILTS ft. SILTS/BASALTS/GR 13 30 Seal Material From Amount Seal Units Grout Weight ft TO 0.00 4.00 BE 1.00 S ft. Screen Diameter From Gauge Material Slot Size Τо Type Filter Pack .010 4 ft. TO 30 ft Filter Pack Material SA Date started 4/13/1998 Completed 4/13/1998 Size 20.00 in. (5) WELL TEST (unbonded) Monitor Well Constructor Certification:

Permeability

Yield

Conductivity

Remarks

PH

Temperature of water

57 °F/C Depth artesian flow found

ft. Signed By JOEL R WELSH

MWC Number 10328

Date

Was water analysis done?

By Whom? CORNFORTH

Depth of strata to be analyzed. From

ft. to

ft

Name of supervising Geologist/Engineer

I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Materials used and information reported above are true to the best knowledge and belief.

(bonded) Monitor 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 well construction standards. This report is true to the best of my knowledge and belief.

MWC Number 10011

Signed By GREG MCINNIS

Date

