

STATE OF OREGON
 WATER SUPPLY WELL REPORT
 (as required by ORS 537.765 & OAR 690-205-0210)

WELL I.D. LABEL# L 118826
 START CARD # 1026504
 ORIGINAL LOG #

(1) LAND OWNER Owner Well I.D. 5512
 First Name _____ Last Name _____
 Company Valley Falls Farms LLC
 Address 9955 SW Potano St.
 City Tualatin State OR Zip 97062

(2) TYPE OF WORK New Well Deepening Conversion
 Alteration (complete 2a & 10) Abandonment (complete 5a)

(2a) PRE-ALTERATION
 Dia + From To Gauge Stl Plstc Wld Thrd
 Casing: _____
 Material From To Amt sacks/lbs
 Seal: _____

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable Auger Cable Mud
 Reverse Rotary Other _____

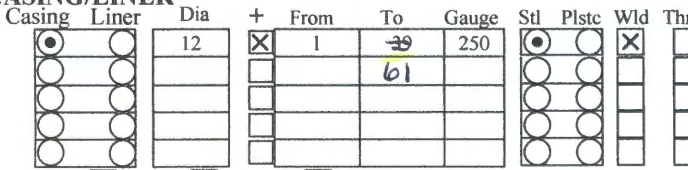
(4) PROPOSED USE Domestic Irrigation Community
 Industrial/ Commercial Livestock Dewatering
 Thermal Injection Other _____

(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)
 Depth of Completed Well 100 ft.

BORE HOLE			SEAL			sacks/
Dia	From	To	Material	From	To	lbs
16	0	39	Bentonite	0	19	12 S
12	39	100			Calculated	9.6
					Calculated	

How was seal placed: Method A B C D E
 Other Poured dry
 Backfill placed from _____ ft. to _____ ft. Material _____
 Filter pack from _____ ft. to _____ ft. Material _____ Size _____
 Explosives used: Yes Type _____ Amount _____

(5a) ABANDONMENT USING UNHYDRATED BENTONITE
 Proposed Amount Pounds Actual Amount Pounds

(6) CASING/LINER
 Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd

 Shoe Inside Outside Other Location of shoe(s) _____
 Temp casing Yes Dia 16 From 0 To 39

(7) PERFORATIONS/SCREENS
 Perforations Method Torch cut
 Screens Type _____ Material _____

Perf/Screen	Casing/Liner	Dia	From	To	Scm/slot width	Slot length	# of slots	Tele/pipe size
Perf	Casing	12	20	60	.375	12	480	

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
 Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)
 200 28' 45' 4
 Temperature 53 °F Lab analysis Yes By _____
 Water quality concerns? Yes (describe below) No
 From To Description Amount Units

(9) LOCATION OF WELL (legal description) Linn 61316
 County Linn Twp 10 S N/S Range 3 W E/W M
 Sec 18 SE 1/4 of the NE 1/4 Tax Lot 402
 Tax Map Number _____ Lot _____
 Lat _____ " or _____ DMS or DD
 Long _____ " or _____ DMS or DD
 Street address of well Nearest address
 38847 Groshong Rd. NE - Albany, OR 97321

(10) STATIC WATER LEVEL

Existing Well / Pre-Alteration	Date	SWL(psi)	+ SWL(ft)
Completed Well	06-18-2015		17

 Flowing Artesian? Dry Hole?

WATER BEARING ZONES Depth water was first found 25

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
06-17-2015	25	51	200		17

(11) WELL LOG Ground Elevation _____

Material	From	To
Topsoil	0	2
Brown clay	2	25
Brown clay with gravel	25	30
Cemented sand & gravel	30	35
Brown sand	35	40
Sand & gravel	40	51
Blue clay	51	52
Cemented sand & gravel	52	55
Blue clay	55	100

RECEIVED BY OWRD
 JONES DRILLING CO., INC.
 29400 SANTIAM HWY.
 LEBANON, OR 97355
 541-367-2560 541-451-2686
 1-800-915-8388
 JUN 29 2015
 SALEM, OR

Date Started 06-15-2015 Completed 06-18-2015

(unbonded) Water Well Constructor Certification
 I certify that the work I performed on the construction, deepening, 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.
 License Number 1888 Date 06-25-2015
 Signed _____

(bonded) Water Well Constructor Certification
 I accept responsibility for the construction, deepening, 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.
 License Number 1684 Date 06-25-2015
 Signed _____
 Contact Info (optional) jonesdrilling@hotmail.com