

(1) LAND OWNER
 Owner Well I.D. DR-3184
 First Name Stan Last Name BOSHART
 Company _____
 Address 32788 TANGENT LOOP
 City TANGENT State ORE Zip 97389

(9) LOCATION OF WELL (legal description)
 County LINN Twp 12 Range 3 WM
 Sec 16 1/4 of the SE 1/4 Tax Lot 606
 Tax Map Number NW SW Lot _____
 Lat _____ " or _____ DMS or DD
 Long _____ " or _____ DMS or DD
 Street address of well Nearest address

32818 TANGENT LOOP TANGENT, ORE

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

(2a) PRE-ALTERATION
 Casing: Dia + From To Gauge Stl Plstc Wld Thrd
 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 140 ft.

BORE HOLE				SEAL				
Dia	From	To	Material	From	To	Amt	sacks/lbs	
12	0	19	BENTONITE	0	19	10	500	
						Calculated	9.1	
12	19	140						
8"	19	140				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
 8" + 1 139 250
 Shoe Inside Outside Other Location of shoe(s) 139'
 Temp casing Yes Dia _____ From _____ To _____

(7) PERFORATIONS/SCREENS
 Perforations Method HOLTE
 Screens Type SLOT Material STEEL

Perf/Screen	Casing/Liner	Dia	From	To	Scr/slot width	Slot length	# of slots	Tele/pipe size
		8"	65	81	1/4"	1"	576	
		8"	85	120	1/4"	1"	1260	

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

150+		128'	2 HRS
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 Temperature 54 °F Lab analysis Yes By _____
 Water quality concerns? Yes (describe below) TDS amount 135
 From _____ To _____ Description _____ Amount _____ Units _____

(10) STATIC WATER LEVEL
 Date _____ SWL(psi) _____ + SWL(ft) _____
 Existing Well / Pre-Alteration _____
 Completed Well 3-26-16 - 3'
 Flowing Artesian? Dry Hole?

WATER BEARING ZONES Depth water was first found 65'

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
3-25-16	65	120	150+		- 3'

(11) WELL LOG Ground Elevation _____

Material	From	To
TOP SOIL	0	2
CLAY-BROWN-STICKY	2	14
CLAY-W/ GRAVEL-BROWN	14	19
SAND-COARSE W/ GRAVEL-BROWN	19	47
CLAY-GRAY	47	49
CLAY-BROWN W/ GRAVEL	49	53
GRAVEL W/ SAND	53	62
CLAY-BROWN W/ GRAVEL	62	67
SAND-BLACK W/ GRAVEL	67	78
GRAVEL-LARGE W/ SAND	78	81
GRAVEL-W/ CLAY BLUE	81	85
GRAVEL SAND	85	98
GRAVEL W/ CLAY BLUE	98	101
GRAVEL W/ SAND	101	118
GRAVEL W/ CLAY-GRAY	118	120
CLAY-GRAY	120	125
CLAY-GRAY	125	140

Date Started 3-24-16 Completed 3-26-16

(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 1974 Date 4-2-16

Signed C.J. Nugent RECEIVED BY OWRE
MAY 12 2016

(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 664 Date 4-2-16
 Signed Charles D. Nugent
 Contact Info (optional): _____