

STATE OF OREGON WATER SUPPLY WELL REPORT

LINN 64531

WELL I.D. LABEL# L

152757

START CARD #

1074726

ORIGINAL LOG #

(as required by ORS 537.545 & 537.765 and OAR 690-205-0210)

8/9/2024

(1) LAND OWNER

Owner Well I.D. 6608

First Name Last Name Company BRYAN WEBBER FARMS INC. Address 3430 N.W. SPRINGHILL DR. City ALBANY State OR Zip 97321

(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 Seal: Material From To Amt sacks/lbs

(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

Depth of Completed Well 65.00 ft. Special Standard (Attach copy)

Table with columns: Dia, From, To, Material, From, To, Amt, lbs. Rows include Bentonite and Calculated entries.

Seal placement 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: Type Amount

Seal Placement Begin Date 8/5/2024 Begin Time 15 30

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount Actual Amount

(6) CASING/LINER

Table with columns: C/L, Dia, From, To, Gauge, Mat. Type, Wld, Thrd, Shoe, Location. Row 1: C, 8, 1, 59, 0.250, ST, X, , , ,

Temp casing Yes Dia 12 From 2 To 18

(7) PERFORATIONS/SCREENS

Perforations Method Holte air perforator

Screens Type Material

Table with columns: Perf/ Screen Liner, Casing, Dia, From, To, Scrm/slot width, Slot length, # of slots, Tele/ Pipe size. Row 1: , Casing, 8, 20, 50, .125, 1, 1200, ,

(8) WELL TESTS: Minimum testing time is 1 hour

Table with columns: Type of Test, Yield (gal/min), Drawdown, Drill Stem/ Pump Depth, Duration (hr). Row 1: Air, 10, , 59, 1

Temperature 59 °F Lab analysis Yes By

Water quality concerns? Yes (describe below) TDS amount 157 ppm From To Description Amount Units

Table for water quality concerns with columns: From, To, Description, Amount, Units

(9) LOCATION OF WELL (legal description)

County LINN Twp 11.00 S N/S Range 3.00 W E/W WM

Sec 1 NE 1/4 of the NW 1/4 Tax Lot 200

Tax Map Number Lot

Lat " or 44.64654600 DMS or DD

Long " or -122.99942100 DMS or DD

Street address of well Nearest address

KNOX BUTTE FARM - KNOX BUTTE, ALBANY, OR

(10) STATIC WATER LEVEL

Table with columns: Existing Well / Pre-Alteration, Date, SWL(psi), SWL(ft). Row 1: Completed Well, 8/5/2024, , 18

Flowing Artesian? Dry Hole?

WATER BEARING ZONES

Depth water was first found 20.00

SWL Date From To Est Flow SWL(psi) SWL(ft)

Table with columns: SWL Date, From, To, Est Flow, SWL(psi), SWL(ft). Row 1: 8/2/2024, 20, 50, 10, , 18

(11) WELL LOG

Ground Elevation

Table with columns: Material, From, To. Rows include Topsoil, Brown clay, Brown sand & gravel, Grey sand & gravel, Grey sandstone.

Construction

Begin Date 8/2/2024 Begin Time 13 30 End Date 8/5/2024

(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.

License Number Date

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.

License Number 1684 Date 8/9/2024

Signed BRET JONES (E-filed)

Drilling Company: JONES DRILLING CO., INC.

WATER SUPPLY WELL REPORT - Map with location identified must be attached and shall include an approximate scale and north arrow

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8/9/2024

Map of Hole

