

WATER WELL REPORT
STATE OF OREGON

RECEIVED

State Well No.

95/E-56d

NOV 23 1933

State Permit No.

PLEASE TYPE or PRINT IN INK JURCS DEP.

MARI...
15583
Per
11/6/86 CW

(1) OWNER:

Name Frank Lumber Co.
Address P.O. Box 1467
City Mill City, State Or.

(2) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandon

If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

Rotary Air Driven
Rotary Mud Dug
 Bored

(4) PROPOSED USE (check):

Domestic Industrial Municipal
Irrigation Test Well Other
Thermal: Withdrawal Reinjection

(5) CASING INSTALLED:

Steel Plastic
Threaded Welded
8" Diam. from +1 ft. to 423 ft. Gauge .250
" Diam. from ft. to ft. Gauge

LINER INSTALLED:

none
" Diam. from ft. to ft. Gauge

(6) PERFORATIONS:

Perforated? Yes No
Type of perforator used factory mill slots
Size of perforations 1/8 in. by 2 1/8 in.
1200 perforations from 97 ft. to 217 ft.
1050 perforations from 343 ft. to 423 ft.
perforations from ft. to ft.

(7) SCREENS:

Well screen installed? Yes No
Manufacturer's Name
Type Model No.
Diam. Slot Size Set from ft. to ft.
Diam. Slot Size Set from ft. to ft.

(8) WELL TESTS:

Drawdown is amount water level is lowered below static level
Was a pump test made? Yes No If yes, by whom?
gal./min. with ft. drawdown after hrs.
Air test 60 gal./min. with drill stem at 400 ft. 1 hrs.
Bailer test gal./min. with ft. drawdown after hrs.
Artesian flow g.p.m.
Temperature of water Depth artesian flow encountered ft.

(9) CONSTRUCTION:

Special standards: Yes No
Well seal—Material used Cement grout
Well sealed from land surface to 55 ft.
Diameter of well bore to bottom of seal 12 in.
Diameter of well bore below seal 12 in.
Number of sacks of cement used in well seal 26 sacks
How was cement grout placed? press pumped
Was pump installed? no Type HP Depth ft.
Was a drive shoe used? Yes No Plugs Size: location ft.
Did any strata contain unusable water? Yes No
Type of Water? depth of strata
Method of sealing strata off
Was well gravel packed? Yes No Size of gravel: ft.
Gravel placed from ft. to ft.

(10) LOCATION OF WELL:

County Marion Driller's well number
SW WNE 1/4 Section 4 T. 9S R. 1E W.M.
Tax Lot # Lot Blk Subdivision
Address at well location: NA- Fern Ridge Rd.

(11) WATER LEVEL: Completed well.

Depth at which water was first found 66 ft.
Static level 167 ft. below land surface. Date 11-4-83
Artesian pressure lbs. per square inch. Date

(12) WELL LOG:

Diameter of well below casing 8
Depth drilled 644 ft. Depth of completed well 423 ft.
Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level and indicate principal water-bearing strata.

MATERIAL	From	To	SWL
Soil med brn	0	1	
Cobbles loose, brn	1	7	
Basalt fract med blk	7	22	
Basalt med blk	22	45	
Basalt hard grey	45	60	
Basalt wathrd brn	60	122	H20
Basalt med, claystn seams			
brn	122	167	
Tufft med brn, fossil			
inseams	167	168	
Basalt conglm. med blk	168	176	H20
Basalt med fract blk	176	193	H20
Basalt conglm. with coal			
inseams blk	193	224	
Basalt hard grey	224	381	
Coal med blk	381	385	
Claystn med grey	385	396	
Basalt visicular, blk	396	419	
Tufft stone, med brn	419	452	
Claystn med grey	452	473	
Claystn hard grey	473	483	

Work started 9-19 19 Completed 10-31 1983
Date well drilling machine moved off of well 11-1 1983

(unbonded) Water Well Constructor Certification (if applicable):

This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.
[Signed] _____ Date _____, 19____

Bonded Water Well Constructor Certification:

Bond _____ Issued by: Union Indemnity
(number) Surety Company Name

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

Name West Coast Drilling Co. Inc.
(Person, firm or corporation) (Type or print)

Address 220 A. Adery St. Mt. Angel, Or.

[Signed] _____
Water Well Constructor
Date 11-4, 1983

WATER WELL REPORT

STATE OF OREGON

MAR 2003

State Well No. 95/1E 56d

State Permit No. _____

PLEASE TYPE or PRINT IN INK

Continuation

(1) OWNER:

Name Frank Lumber Co.
 Address P.O. Box 1467
 City Mill City, Or. State Or.

(2) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandon
 If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL: (4) PROPOSED USE (check):

Rotary Air <input type="checkbox"/>	Driven <input type="checkbox"/>	Domestic <input type="checkbox"/>	Industrial <input type="checkbox"/>	Municipal <input type="checkbox"/>
Rotary Mud <input type="checkbox"/>	Dug <input type="checkbox"/>	Irrigation <input type="checkbox"/>	Test Well <input type="checkbox"/>	Other <input type="checkbox"/>
<input type="checkbox"/>	Bored <input type="checkbox"/>	Thermal <input type="checkbox"/>	Withdrawal <input type="checkbox"/>	Reinjection <input type="checkbox"/>

(5) CASING INSTALLED:

Steel Plastic
 Threaded Welded

_____ "Diam. from _____ ft. to _____ ft. Gauge _____

_____ "Diam. from _____ ft. to _____ ft. Gauge _____

LINER INSTALLED:

_____ "Diam. from _____ ft. to _____ ft. Gauge _____

(6) PERFORATIONS:

Perforated? Yes No
 Type of perforator used _____
 Size of perforations _____ in. by _____ in.
 _____ perforations from _____ ft. to _____ ft.
 _____ perforations from _____ ft. to _____ ft.
 _____ perforations from _____ ft. to _____ ft.

(7) SCREENS:

Well screen installed? Yes No
 Manufacturer's Name _____
 Type _____ Model No. _____
 Diam. _____ Slot Size _____ Set from _____ ft. to _____ ft.
 Diam. _____ Slot Size _____ Set from _____ ft. to _____ ft.

(8) WELL TESTS:

Drawdown is amount water level is lowered below static level

Was a pump test made? Yes No If yes, by whom? _____

_____: _____ gal./min. with _____ ft. drawdown after _____ hrs.
 " _____ " " " " "

Air test _____ gal./min. with drill stem at _____ ft. _____ hrs.
 Bailer test _____ gal./min. with _____ ft. drawdown after _____ hrs.
 Artesian flow _____ g.p.m.
 _____ Temperature of water _____ Depth artesian flow encountered _____ ft.

(9) CONSTRUCTION:

Special standards: Yes No
 Well seal—Material used _____
 Well sealed from land surface to _____ ft.
 Diameter of well bore to bottom of seal _____ in.
 Diameter of well bore below seal _____ in.
 Number of sacks of cement used in well seal _____ sacks
 How was cement grout placed? _____

 Was pump installed? _____ Type _____ HP _____ Depth _____ ft.
 Was a drive shoe used? Yes No Plugs _____ Size: location _____ ft.
 Did any strata contain unusable water? Yes No
 Type of Water? _____ depth of strata _____
 Method of sealing strata off _____
 Was well gravel packed? Yes No Size of gravel: _____
 Gravel placed from _____ ft. to _____ ft.

(10) LOCATION OF WELL:

County	Driller's well number				
	1/4	1/4 Section	T.	R.	W.M.
Tax Lot # _____	Lot _____	Blk _____	Subdivision _____		
Address at well location: _____					

(11) WATER LEVEL: Completed well.

Depth at which water was first found _____ ft.
 Static level _____ ft. below land surface. Date _____
 Artesian pressure _____ lbs. per square inch. Date _____

(12) WELL LOG:

Diameter of well below casing _____
 Depth drilled _____ ft. Depth of completed well _____ ft.

Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level and indicate principal water-bearing strata.

MATERIAL	From	To	SWL
Claystn hard blk	483	507	
Claystn med grey	507	547	
Claystn med brown	547	566	
Volcanics Redd, brn-med	566	569	
Volcanics, andesite, cemented, red-green	569	644	

Work started _____ 19 _____ Completed _____ 19 _____
 Date well drilling machine moved off of well _____ 19 _____

(unbonded) Water Well Constructor Certification (if applicable):

This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.
 [Signed] _____ Date _____, 19 _____

Bonded Water Well Constructor Certification:

Bond _____ Issued by: _____ Surety Company Name _____
 This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
 Name _____ (Person, firm or corporation) _____ (Type or print)
 Address _____
 [Signed] Cheryl Stark Water Well Constructor _____
 Date _____, 19 _____

NOTICE TO WATER WELL CONSTRUCTOR
 The original and first copy of this report are to be filed with the

WATER RESOURCES DEPARTMENT,
 SALEM, OREGON 97310
 within 30 days from the date of well completion.
 SP*45292-690