

16

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17467

65/26/1766

26353

STATE OF OREGON WATER WELL REPORT (as required by ORS 537.765)

SEP 11 1991

(START CARD) #

1022

(1) OWNER:

Name NORPAC FOODS, INC. WATER RESOURCES DEPT. Address 930 W. WASHINGTON SALEM, OREGON City STANTON State ORE Zip 97383

Well Number:

(9) LOCATION OF WELL by legal description:

Latitude Longitude Section 17 Nor S, Range 2W E or W, WM. Tax Lot Lot Block Subdivision Street Address of Well (or nearest address)

(2) TYPE OF WORK:

New Well Deepen Recondition Abandon

(3) DRILL METHOD

Rotary Air Rotary Mud Cable Other

(4) PROPOSED USE:

Domestic Community Industrial Irrigation Thermal Injection Other

(5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes No Depth of Completed Well 310 ft. Explosives used Yes No Type Amount

Table with columns: HOLE Diameter, From, To, Material, SEAL From, To, Amount sacks or pounds

How was seal placed: Method A B C D E

Backfill placed from ft. to ft. Material Gravel placed from ft. to ft. Size of gravel

(6) CASING/LINER:

Table with columns: Casing Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded

Final location of shoes: 310'

(7) PERFORATIONS/SCREENS:

Perforations Method MILLS KNIFE Screens Type Material

Table with columns: From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner

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

Pump Bailer Air Flowing Artesian Yield gal/min Drawdown Drill stem at Time

Temperature of water 53° Depth Artesian Flow Found Was a water analysis done? Did any strata contain water not suitable for intended use?

(10) STATIC WATER LEVEL:

66.5 ft. below land surface. Date 8-25-91 Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES:

Table with columns: From, To, Estimated Flow Rate, SWL

(12) WELL LOG:

Table with columns: Material, From, To, SWL

Date started JUNE 3, 1991 Completed AUG. 25, 1991

(unbonded) Water Well Constructor Certification: I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards.

(bonded) Water Well Constructor Certification: I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above.

STATE OF OREGON
WATER WELL REPORT
(as required by ORS 537.765)

2 of 2

RECEIVED

MAINT
7467

SEP 11 1991

(START CARD) #

26353

(1) OWNER: **NORPAC FOODS, INC**
Name: **NORPAC FOODS, INC**
Address: _____
City: _____ State: _____ Zip: _____
Well Number: _____

(9) LOCATION OF WELL by legal description:
Latitude _____ Longitude _____
Nor S. Range _____ E or W, WM. _____
Section _____ 1/4 _____ 1/4 _____
Tax Lot _____ Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) _____

(2) TYPE OF WORK:
 New Well Deepen Recondition Abandon

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

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Other _____

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well _____ ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	

How was seal placed: Method A B C D E
 Other _____
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of sheets: _____

(7) PERFORATIONS/SCREENS:

Perforations Method _____
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
			1 hr.

Temperature of water _____ Depth Artesian Flow Found _____
Was a water analysis done? Yes By whom _____
Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
Depth of strata: _____

(10) STATIC WATER LEVEL:
_____ ft. below land surface. Date _____
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL

(12) WELL LOG: _____ Ground elevation _____

Material	From	To	SWL
- SMALL-MEDIUM GRAVEL W STREAKS OF BLUE CLAY	180'	200'	66.5'
- SAND, GRAVEL SMALL-MEDIUM W/ LESS CLAY	200'	271'	
- SMALL-LARGE MEDIUM GRAVEL W/ BROWN + BLACK SAND	271'	275'	
- SMALL-LARGE GRAVEL W/ BROWN SAND	275'	284'	
- SMALL-LARGE GRAVEL, BROKEN + WEATHERED, W/ BLACK SAND	284'	305'	66.5'
- LARGE GRAVEL W/ BLUE CLAY	305'	310'	

Date started _____ Completed _____

(unbonded) Water Well Constructor Certification:
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 my best knowledge and belief.
Signed _____ Date _____ WWC Number _____

(bonded) Water 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.
Signed _____ Date _____ WWC Number _____