STATE O WATER SUPPLY WEL (as required by ORS 537.765)

Instructions for completing this report are on the last page of this form.

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| OF OREGON | 19 |
| JPPLY WELL REPORT | 1 - |

| RECEIVED | 65/1W/23 BA |
|-------------|-------------|
| AllC 1 1000 | -76-6 |

AUG 1 1991 (START CARD) # 77929 NATER RESOURCES LIEPT T SALEM_QRECOMEL IN

| (1) OWNER: | Well ? | Number | (9) LOCATION OF WELL by legal description: | | | | |
|-------------------------------|-------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|-------------|
| | nen Brothers Fa | | County Marion Latitude 350 Longitude 14" | | | | |
| Address 14 | 358 Dominic Roa | d_NE | Township 6S N or S Range IW E or W. WM. Section 23 NE 1/4 NW 1/4 | | | | ′. WM. |
| City Mt | . Angel State OR | Zip 97362 | Section_23 | <u>NE</u> 1/4_ | <u>NW</u> | 1/4 | |
| (2) TYPE OF WO | RK | | Tax LotL | otBlock | | | |
| New Well Deep (3) DRILL METH | pening Alteration (repair/recor | ndition) Abandonment | Street Address of Well | (or nearest address) | 7750 An | nen L | ane |
| • • | | Auger | (10) STATIC WATER | R LEVEL: | and the second s | | |
| | | _76.3 ft. beld | ow land surface. | D | ate7 / | 26/95 | |
| (4) PROPOSED U | SE: | | | lb. per squa | | ate | |
| | | X Irrigation | (11) WATER BEARI | NG ZONES: | - "AM-AN 678" 3 COMMON TO STATE OF THE STATE | | |
| | | Other | | | | | |
| | CONSTRUCTION: | Depth at which water was | first found | 12' | | | |
| | approval Yes No Depth of | Completed Well 635ft. | | | | | |
| Explosives used | Yes X No Type | Amount | From | To | Estimated | Flow Rate | SWL |
| HOLE | SEAL | | 435 | 448 | 100 | | |
| Diameter From To | o Material From T | o Sacks or pounds | 497 | 510 | 100 | | |
| | 0 bentonite 0 4 | $0 \mid 63 \text{ sacks}$ | 547 | 561 | 200 | | |
| 141 4038 | 30 | | 593 | 595 | 400 | | _ |
| 16"380 | 400 cement 38540 | 00 12 sacks | | | l . <u></u> | | l <u>_</u> |
| | | | (12) WELL LOG: | | ALL LOCATION CO. | | |
| How was seal placed: | Method □ A 🔀 B | C D E | | Elevation | | | |
| | mped through th | | | | | | |
| Backfill placed from | ft. to ft. M | aterial | Materia | al | From | То | SWL |
| | ft. to ft. Si | ze of gravel | dirt brown | | Q | 4 | |
| (6) CASING/LIN | | And the second of the second o | dirt 3 larg | ge_cobbles | 4 | 12 | |
| • • | | astic Welded Threaded | | l gravel co | urse 12 | 18_ | |
| Casing: 14" | +1 400 .375 | | blue gray c | lay with | 18 | 32_ | |
| Cushing | | | occasional c | cobbles | | $\mathbf{x}\mathbf{\mathbf{Q}}\mathbf{x}\mathbf{x}\mathbf{x}$ | , |
| | | | course cobb | | | 70 | |
| | | | with blue g | gray_clay | | | ļ |
| Liner: | | | blue gray c | clay_with | 70_ | 92 | |
| | | | gravel cour | cse | | | |
| Final location of shoe | e(s) 400' | | gravel cour silty clay | brown | 92 | 96 | |
| PERFORATION | ONS/SCREENS: | | gray clay c | conglmerate | 96 | _103_ | |
| Perforations | Method | | cemented gr | ravel green | 103 | 168 | |
| Screens | Type | Material | <u>c</u> lay | | | | |
| From , To , | Slot Te | ele/pipe size Casing Lines | | | 168 | 192 | |
| | | | conglomerat | te | | | |
| ` | | | brown gray | clay stick | y 192 | 210 | |
| | | | gray clay v | with tine g | grav ZIC | 258 | |
| | | 및 | clay gray | sticky | 228 | 270 | |
| | | U U | sticky clay | A AGITOM | 270 | 272 | |
| | | | clay gray v | with line g | grav 2/2 | 328 | |
| (8) WELLTESTS | S: Minimum testing time is 1 | hour | Date started6/3(| | | 44/95 | |
| | | Flowing | (unbonded) Water Well | I performed on the cor | | ution or ab | andonment |
| Pump | Bailer Air | Artesian | of this well is in complian | nce with Oregon water | supply well con | istruction s | tandards. |
| Yield gal/min | Drawdown Drill stem a | | Materials used and informand belief. | nation reported above | are true to the b | est of my k | nowledge |
| 800 | _NAbottor | n <u>l hr.</u> | and belief. | | WWC Nun | oher 15 | $\supset R$ |
| | | | Signal 927, 7 | 11/16 | | Date 5/ | 5192 |
| | | New Found | Signed(bonded) Water Well Co | onstructor Certificati | W- 45 W- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - | | 01/ |
| Temperature of water | | low Found | ' `_' | for the construction, a | | ndonment: | work |
| Was a water analysis | | Too little | performed on this well do | uring the construction of | dates reported a | bove. All v | vork |
| Did any strata contain | n water not suitable for intended u | se? Too little | performed during this tin | ne is in compliance wit | h Oregon water | supply wel | 1 |
| | Odor Colored O | uner | Construction standards. | | WWC Nur | | 358 |
| Depth of strata: | | | Signed Denne | \$ Stal | | Date S | -8-GC |
| | AM CODILITIAMED DESCRIP | ODO DEDADONATATA | | LICTOR THIP | COPY-CUST | | |
| ORIGINAL & FIR | ST COPY-WATER RESOURCE | LES DEPARTMENT S | ECOND COL 1-2011211 | COCION HINL | | · OITER | |

| STATE OF OREGON | |
|-------------------|--------|
| WATER SUPPLY WELL | REPORT |

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| WATER SUPPLY WELL REPORT (as required by ORS 537.765) | NATER DEC. (START CARD) # Page 2 | | | |
|----------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| Instructions for completing this report are on the last page of this form. | NATER RESOURC (START CARD) # Page 2 | | | |
| | SALEM, OREGON (9) LOCATION OF WELL by legal description: | | | |
| (1) OWNER: Well NumberName Annen Brothers Farms | County Marion Latitude 350 Lancitude 14" | | | |
| Address 14358 Dominic Road NE | Township 6S N or S Range IW E or W. WM. Section 23 NE 1/4 NW 1/4 | | | |
| City Mt Angel State OR Zip 97362 | Section 2.3 NE 1/4 NW 1/4 | | | |
| (2) TYPE OF WORK | Tax Lot Lot Block Subdivision | | | |
| New Well Deepening Alteration (repair/recondition) Abandonment | Street Address of Well (or nearest address) 7750 Annen Lane | | | |
| (3) DRILL METHOD: | | | | |
| Rotary Air Rotary Mud Cable Auger | (10) STATIC WATER LEVEL: | | | |
| Other (4) PROPOSED USE: | ft. below land surface. | | | |
| (4) PROPOSED USE: | Artesian pressure lb. per square inch. Date lt. WATER BEARING ZONES: | | | |
| Domestic Community Industrial Irrigation Thermal Injection Livestock Other | (II) WAIER BEARING ZONES: | | | |
| Thermal Injection Livestock Other (5) BORE HOLE CONSTRUCTION: | Depth at which water was first found | | | |
| Special Construction approval Yes No Depth of Completed Well ft. | Deput at which water was first found | | | |
| Explosives used Yes No Type Amount | From To Estimated Flow Rate SWL | | | |
| HOLE SEAL | | | | |
| Diameter From To Material From To Sacks or pounds | | | | |
| | | | | |
| | | | | |
| | | | | |
| How was seal placed: Method A B C D E | (12) WELL LOG: | | | |
| | Ground Elevation | | | |
| Dother ft. to ft. Material | Material From To SWL | | | |
| Gravel placed from ft. to ft. Size of gravel | clay gray with wood 328 355 | | | |
| (6) CASING/LINER: | clay gray with wood 328 355 basalt gray medium 355 358 | | | |
| Diameter From To Gauge Steel Plastic Welded Threaded | basalt gray broken 358 36/ | | | |
| Casing | _sand stone conglomerate 367 385 | | | |
| | _basalt_fractured_highly_385 394 | | | |
| | weathered basalt gray med. hard 394 428 | | | |
| | course grained | | | |
| | basalt gray and brown 428 435 | | | |
| Final location of shoe(s) | broken with clay seams | | | |
| (7) PERFORATIONS/SCREENS: | basalt grain gray with 435 443 | | | |
| Perforations Method | some red vesicular with *** x 456 WB | | | |
| Screens Type Material | some blue gray | | | |
| Slot Tele/pipe From To size Number Diameter size Casing Liner | basalt green and gray 443 456 | | | |
| | medium | | | |
| | basalt gray hard 456 497 | | | |
| | basalt gray med with 497 510 WB fractured same and clay | | | |
| | stone seams | | | |
| | basalt gray very hard 510 547 | | | |
| (8) WELL TESTS: Minimum testing time is 1 hour | Date started Completed | | | |
| Flowing | (unbonded) Water Well Constructor Certification: | | | |
| Pump Bailer Air Artesian | I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. | | | |
| Yield gal/min Drawdown Drill stem at Time | Materials used and information reported above are true to the best of my knowledge | | | |
| | and belief. WWC Number 150 3 | | | |
| | Signed Villa Jahr Date 8/8/9 | | | |
| Temperature of water Depth Artesian Flow Found | (bonded) Water Well Constructor Certification: | | | |
| Was a water analysis done? Yes By whom | I accept responsibility for the construction, alteration, or abandonment work | | | |
| Did any strata contain water not suitable for intended use? Too little | performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well | | | |
| Salty Muddy Odor Colored Other | construction standards. This report is true to the best of my knowledge and belief. | | | |
| Depth of strata: | WWC Number1358 | | | |
| | Signed Depth Date 8-8-95 | | | |
| ORIGINAL & FIRST COPY-WATER RESOURCES DEPARTMENT SEC | COND COPY CONSTRUCTOR THIRD COPY-CUSTOMER | | | |

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STATE OF OREGON

(1) OWNER:

Rotary Air

Domestic

Thermal

Diameter

How was seal placed:

Backfill placed from

Gravel placed from

(6) CASING/LINER:

Diameter

Was a water analysis done?

Depth of strata:

Other .

Casing:

Lin

(7)

Other

(2) TYPE OF WORK

(3) DRILL METHOD:

(4) PROPOSED USE:

Name

Address

WATER SUPPLY WELL REPORT (as required by ORS 537.765)

Community

Injection

BELLINED AUG 1 | 1995 (START CARD) #_ Page 3 Instructions for completing this report are on the last page of this form. (\$\ALOGATONEOON ELL by legal description: Well Number _Longitude_14" County Marion Latitude 350' Annen Brothers Farms Township 6S N or S Range IW <u>14358 dominic Road</u> E or W. WM. Zip 97362 NE 1/4 NW Section_ 23 1/4 Mt. Angel State Block Subdivision Tax Lot Lot Annen Lane Street Address of Well (or nearest address) New Well Deepening Alteration (repair/recondition) Abandonment (10) STATIC WATER LEVEL: Rotary Mud Cable ft. below land surface. Date Artesian pressure lb. per square inch. (11) WATER BEARING ZONES: Irrigation Industrial Livestock Other (5) BORE HOLE CONSTRUCTION: Depth at which water was first found Special Construction approval Yes No Depth of Completed Well **Estimated Flow Rate** SWL Explosives used Yes No Type Amount Material Sacks or pounds (12) WELL LOG: Method Ground Elevation From To SWL Material 554 basal clay stone broken547 Size of gravel WBbasalt gray red broken 561 WBporous Welded Threaded Gauge Steel 561 basalt gray hard 576 593 basalt very hard П \Box clay stone gray and 593 595 WBgreen broken hard WB

| | | | | | (unbanded) Water Wall Constructor Contification | | | | | |
|----------------------|---------------------|-------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|-------------------------------------------------|--------------|-------------|---------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|
| (8) WELL TEST | ΓS: Minimum to | esting time | is 1 hour | | | Date started | Complete | ed | MICONOMIC TO TO THE STATE OF TH | |
| | | - ALL | | | | | • | | | |
| From To | Slot size Number | Diameter | Tele/pipe size | Casing | Liner | | | | | - |
| Perforations Screens | Type | | Materi | ial | | | | | | |
| (7) PERFORAT | IONS/SCREEN | S: | THE RESERVE OF THE PARTY OF THE | | | | | | | - |
| Final location of sh | oe(s) | | | | | | | | | |
| | | | | | | with fract s | | | | Ĺ |
| Liner: | 1 1 1 | 1 1 1 | 1 1 | | 1 1 | Dasait gray | very nard i | 1 747 1 | 033 | í |

Flowing Bailer Air Artesian Pump Yield gal/min 1 hr. Depth Artesian Flow Found Temperature of water_

Yes By whom

Did any strata contain water not suitable for intended use?

Salty Muddy Odor Colored Other

I certify that the work I performed on the construction, 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.

Signed

(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 water supply well