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WELL I.D.# 130603

NOV 15 1999

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

(START CARD) # 101537

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

SALEM, OREGON

(1) OWNER: Well Number _____
Name Skylane Farms Div. of Valley Fresh Foods
Address 8539 Crosby Rd. NE
City Woodburn State OR Zip 97071

(2) TYPE OF WORK
 New Well Deepening Alteration (repair/recondition) Abandonment

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

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

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 244 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
16"	0	244	3" cement	1	202	139 sacks

How was seal placed: Method A B C D E
 Other _____

Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from 203 ft. to 244 ft. Size of gravel 5/8

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 10"	+3	205	3"	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2" gravel feed pipe	from +1	203	sch 40	<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 shoe(s) _____

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
+3	205	3"		10"	pipe	<input checked="" type="checkbox"/>	<input type="checkbox"/>
205	3'	235	9'	.080	10" p.s.	<input type="checkbox"/>	<input type="checkbox"/>
235	9'	244	3'		10" pipe	<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Flowing Artesian	Time
600	67		<input type="checkbox"/>	1 hr.
600	73		<input type="checkbox"/>	5 hrs
800	95		<input type="checkbox"/>	2 hrs

Temperature of water 53 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: _____

(9) LOCATION OF WELL by legal description:
County Marion Latitude _____ Longitude _____
Township 5S N or S Range 2W E or W. WM.
Section 1 NE 1/4 NW 1/4
Tax Lot 00600 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 8539 Crosby Rd. NE
Woodburn, OR 97071

(10) STATIC WATER LEVEL:
51' 6" ft. below land surface. Date 10/14/99
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 127

From	To	Estimated Flow Rate	SWL
127	130	40 crpm	52'
143	148	50 gpm	52'
207	242	1000 gpm	52'

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Topsoil	0	2	
Clay brown	2	19	
Clay grey	19	43	
Clay grey silty	43	73	
Sand & clay gray	73	86	
Clay grey silty	86	88	
Clay grey sticky	88	93	
Clay grey sandy	93	102	
Clay grey sticky	102	108	
Clay green sticky	108	121	
Gravel cemented	121	127	52
Gravel & sand	127	130	52
Sand brown clay	130	134	52
Clay blue	134	136	
Sand black	136	148	52
Clay gray & blue sandy	148	154	
Clay grey soft	154	158	
Sand silt	158	163	52
Clay gray	163	174	
Clay green sticky	174	186	Continued

Date started 7/21/99 Completed 10/14/99

(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 water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.

WWC Number 1704
Signed [Signature] Date 11/10/99

(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 construction standards. This report is true to the best of my knowledge and belief.

WWC Number 783
Signed [Signature] Date 11/8/99

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Skylane Farms
5S 2W Sec 1, NE $\frac{1}{4}$, NW $\frac{1}{4}$

Start Card # 101537 Well I.D.# L30603

WATER RESOURCES DEPT.
SALEM, OREGON

Well Log continued

Material	From	To	SWL
Sand & clay grey	186	192	
Clay sandy	192	195	
Clay grey, sticky	195	202	
Clay grey sandy	202	207	
Sand black	207	212	52'
Clay & sand	212	220	52
Sand black	220	242	52
Clay brown	242	247	