

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

MARI
 54631

WELL I.D.# L30609 30608

(START CARD) # 101540

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

(1) OWNER:

Well Number _____
 Name Cameron Buck / Blue Sky Farm
 Address P.O. Box 217
 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 232 1/2 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
18"	0	5	Bentonite	0	5	8sacks
18"	5	232	6"/Cement	5	158	230 sacks

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

Backfill placed from _____ ft. to _____ ft. Material _____
 Gravel placed from 158 ft. to 232 ft. Size of gravel pea

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<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"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<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
+4	159	6'				12"	pipe	<input checked="" type="checkbox"/>	<input type="checkbox"/>
159	6"	195		.080		12"	p.s.	<input type="checkbox"/>	<input type="checkbox"/>
195	210	6'				12"	pipe	<input checked="" type="checkbox"/>	<input type="checkbox"/>
210	6"	225		.080		12"	p.s.	<input type="checkbox"/>	<input type="checkbox"/>
225	9"	232		6"		12"	pipe	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Bottom plate & Lift bail

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

<input checked="" type="checkbox"/> Pump	<input type="checkbox"/> Bailer	<input type="checkbox"/> Air	<input type="checkbox"/> Flowing Artesian
Yield gal/min	Drawdown	Drill stem at	Time
1100	108		1 hr.
			6hrs

Temperature of water 53 Depth Arterial _____
 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 4S N or S Range 2W E or W. WM.
 Section 10 SE 1/4 SW 1/4
 Tax Lot R11966 Block _____ Subdivision _____
 Street Address of Well (or nearest address) 21333 French
Prairie Rd. St. Paul, OR 97137

(10) STATIC WATER LEVEL:

40 ft. below land surface. Date 1/26/00
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 59

From	To	Estimated Flow Rate	SWL
59	78	25 gpm	12
133 133	154 154	600 gpm	41
159	191	900 gpm	41
209	226	300 gpm	41

(12) WELL LOG:

Material	From	To	SWL
Top soil	0	1	
Clay brown hard	1	7	
Clay brown	7	26	
Clay gray	26	59	
Sand & silt fine	59	78	12
Clay silty gray	78	82	
Clay gray sticky	82	92	
Clay lt. gray sticky	92	96	
Clay green sticky	96	103	
Clay dk. gray sticky	103	107	
Clay lt. gray sticky	107	122	
Clay gray silty	122	133	
Sand & gravel	133	154	41
Clay gray sticky	154	159	
Sand gravel & clay	159	161	41
Sand black	161	179	41
Sand w/layers of clay	179	191	41
Clay gray sticky	191	194	
Clay green sticky	194	199	
Sand silty brown - CONTINUED	199	203	41

Date started 10/19/99 Completed 1/26/00

(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.

Signed [Signature] WWC Number 1704
 Date 2/23/00

(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.

Signed [Signature] WWC Number 783
 Date 2/23/00

RECEIVED

FEB 28 2000

WATER RESOURCES DEPT.
 SALEM, OREGON

MARI
541631

Cameron Buck / Blue Sky Farm
P.O. Box 217
Woodburn, OR 97071

Well I.D.# L30609

Start Card # 101540

Marion County Township: 4S Range: 2W Sec: 10 SE1/4, SW 1/4

WELL LOG

Material	From	To	SWL
Continued			
Sandy Clay	203	206	
Clay gray sticky	206	209	
Clay gray, sand layers	209	218	41'
Sand, thin layers of clay	218	226	41'
Clay blue sticky	226	232	

RECEIVED

FEB 28 2000

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SALEM, OREGON