

Amendment

Mar 1
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STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765)

WELL I.D. # 13805
START CARD # 138411

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

(1) LAND OWNER: Name Charles K. Johnston Well Number _____
Address 17325 Arbor Grove Rd
City Woodburn State OR Zip 97071

(2) TYPE OF WORK: New Well Deepening Alteration (or improvement) Abandonment

(3) DRILL METHOD: Rotary Air Rotary Mud Hand Auger N/A
 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 105 ft
Explosives used Yes No Type _____ Amount _____

HOLES and SEAL TABLE with columns for Diameter, From, To, Material, From, To, Sacks of Portland Cement. Includes handwritten 'N/A'.

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: 10" 114' 0" 250 (R) () () ()
Liner: _____ () () () ()
Drive Shoe used Inside Outside None
Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS: Perforations Method _____
 Screens Type _____ Material _____
Table with columns: From, To, Slot size, Number, Diameter, Pipe size, Casing, Liner.

(8) WELL TESTS: Minimum testing time is 1 hour
OR Pump Bail Air Air Heavy
Yield gal/min 600 Drawdown 40 Drill stem at _____ Time _____
Temperature of water 52° Depth Artesian Flow Found _____
Was a water analysis done? Yes By whom _____
Did any strata contain water not suitable for intended use? Yes No
 Salty Muddy Silty Colored Other _____
Depth of strata _____
*As Noted on Original Well Log

(9) LOCATION OF WELL by legal description:
County Polk Latitude _____ Longitude _____
Township 45 N or S Range 26 E or W WM
Section 34 SE 1/4 SW 1/4
T14 N, R26 W, S34 SW
Street Address of Well (or parcel address) 17325 Arbor Grove Rd

(10) STATIC WATER LEVEL: 32' 5" ft. below land surface Date 4/3/01
Artesian pressure _____ lb per square inch Date _____

(11) WATER BEARING ZONES: Depth at which water was first found SUL 32' 5"
Table with columns: From, To, Estimated Flow Rate, SWI.

(12) WELL LOG: Ground Elevation _____

WELL LOG TABLE with columns: Material, From, To, SWI. Includes handwritten notes: 'No Drilling, only work done was extending well casing to 1' 6" above land surface with flat plate on top for pump base and 14" access port on side. Existing well log MAR 1986'

RECEIVED
APR 30 2001
WATER RESOURCES DEPT.
SALEM, OREGON

Date started 3/25/01 Completed 4/3/01
Inland Northwest Water Well Constructor Certification
I certify that the work performed on the construction, alteration, or abandonment of this well was in compliance with Oregon water supply well construction standards. Materials used and dimensions reported above are true to the best of my knowledge and belief.
Signed Eric A. Blum WWC Number 1275 State 4/1/01
Inland Northwest 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. The work was done to the best of my knowledge and belief.
Signed Eric A. Blum WWC Number 899 State 4/5/01

STATE OF OREGON
WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

WATER RESOURCES DEPARTMENT
SALE & SERVICE DIVISION

WELL I.D. # L 33805

START CARD # 138411

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

(1) LAND OWNER
Name Charles R. Johnston Well Number _____
Address 17325 Arbor Grove Rd
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 N/A
 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 105 ft.
Explosives used Yes No Type _____ Amount _____

HOLE SEAL
Diameter From To Material From To Sacks or pounds
N/A

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:
Casing: Added To Existing Gauge Steel Plastic Welded Threaded
10" ±1 1/2' 0 .250
Liner: _____

Drive Shoe used Inside Outside None
Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:
 Perforations Method _____
 Screens Type _____ Material _____

From To Slot size Number Diameter Tele/pipe size Casing Liner
N/A

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

Pump Bailer Air Flowing Artesian

Yield gal/min Drawdown Drill stem at Time
* 600 40 _____ 1 hr.

* Temperature of water 52° 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: _____
*As Noted on Original Well Log

(9) LOCATION OF WELL by legal description:
County Marion Latitude _____ Longitude _____
Township 4S N or S Range 2W E or W. WM.
Section 34 SE 1/4 SW 1/4
Tax Lot 2500 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 17325 Arbor Grove Rd

(10) STATIC WATER LEVEL:
32' 5" ft. below land surface. Date 4/3/01
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found SWL 32' 5"

Table with 4 columns: From, To, Estimated Flow Rate, SWL. Row 1: N/A

(12) WELL LOG:
Ground Elevation _____

Table with 4 columns: Material, From, To, SWL. Content: No Drilling, only work done was extending well casing to 1' 6" above land surface with flat plate on top for pump base and 1 1/2" access port on side. Existing well is: MARI 1386

Date started 3/26/01 Completed 4/3/01

(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 1275 Date 4/6/01

(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 649 Date 4/6/01