

AUG 07 2002

STATE OF OREGON
 WATER SUPPLY WELL REPORT WATER RESOURCES DEPT.
 (as required by ORS 537.765) SALEM, OREGON

WELL I.D. # L 56632
 START CARD # 101569

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

(1) OWNER: Well Number _____
 Name Itha Reiling
 Address 10773 Feller Rd. NE
 City Hubbard State OR Zip 97032

(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 147 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE		SEAL					
Diameter	From To	Material	From To	Sacks or pounds			
16"	0 255	hole plug	0 8	20 sacks			
		bentonite					
		cement	8 100	70sacks & 5% bentonite			

How was seal placed: Method A B C D E
 Other _____
 Backfill placed from 147 ft. to 255 ft. Material cement & 5% bentonite
 Gravel placed from 101 ft. to 147 ft. Size of gravel 5-8

(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"/>

Final location of shoe(s) _____

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

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
+2 6"	101 4"			10"	pipe	<input checked="" type="checkbox"/>	<input type="checkbox"/>
101 4"	135 7"	.075		10"	p.s.	<input type="checkbox"/>	<input type="checkbox"/>
135 7"	147			10"	pipe	<input checked="" type="checkbox"/>	<input type="checkbox"/>
147	Bottom plate & lift bail					<input type="checkbox"/>	<input type="checkbox"/>
+1	100			2 1/2"	pipe - Gravel feed	<input type="checkbox"/>	<input type="checkbox"/>

(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
200	30		1 hr.
200	34 10"		7 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 4S N or S Range 1W E or W. WM.
 Section 17 SW 1/4 SW 1/4
 Tax Lot 300 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) Matthieu Lane
 Donald, OR

(10) STATIC WATER LEVEL:
 _____ 78 ft. below land surface. Date 7/8/02
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found 49

From	To	Estimated Flow Rate	SWL
49	66	4 gpm	15
101	138	200 gpm	78

(12) WELL LOG:
 Ground Elevation _____

Material	From	To	SWL
Topsoil	0	2	
Clay brown	2	18	
Clay gray	18	49	
Sand & clay gray	49	64	15
Sand & gravel w/clay seams	64	66	15
Clay brown & red	66	78	
Clay brown sandy	78	86	
Clay gray sticky	86	97	
Clay gray soft	97	104	
Sand & gravel loose	104	106	78
Sand & gravel cemented	106	121	78
Sand & gravel	121	128	78
Sand green	128	138	78
Clay green sticky	138	143	
Clay gray & green	143	168	
Clay gray & green sticky	168	223	
Clay gray sticky	223	226	
Clay green silty	226	233	
Clay gray	233	238	
Clay gray silty	238	255	

Date started 4/10/02 Completed 7/15/02

(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 *Jay A. Aoe* WWC Number 1704 Date 7/23/02

(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 *L. Van Dusen* WWC Number 783 Date 7/18/02