

MARI 59533

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

WELL I.D. # L 79515

START CARD # 183628

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

(1) LAND OWNER Well Number _____
 Name JPLN, Inc.
 Address 1118 Lancaster Drive N.E.
 City Salem State Oregon Zip 97301

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

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

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

(5) BORE HOLE CONSTRUCTION Special Construction: Yes No
 Depth of Completed Well 328 ft.
 Explosives used: Yes No Type _____ Amount _____

BORE HOLE			SEAL			Sacks or Pounds
Diameter	From	To	Material	From	To	
12"	0	39'	Cement	0	39'	15 sacks
9 5/8"	39'	182'	Cement	159'	182'	10 sacks
7 7/8"	182'	328'				

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: 8"	+1' 4"	182'	.260	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Liner: 7" OD	167' 2"	328'	.188	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
 Final location of shoe(s) 182' Note: inside of shoe was milled off

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

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
310'	328'	1x6"	42			<input type="checkbox"/>	<input checked="" type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
500+		325'	2 hr.

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 (legal description)
 County Marion
 Tax Lot 2600 Lot _____
 Township 7 S N or S Range 2 W E or W WM
 Section 28 SW 1/4 SE 1/4
 Lat _____ ° _____ ' _____ " or _____ (degrees or decimal)
 Long _____ ° _____ ' _____ " or _____ (degrees or decimal)
 Street Address of Well (or nearest address) 5590 State Street S.E.
Salem, Oregon

(10) STATIC WATER LEVEL
40' 6" ft. below land surface. Date 12/12/2005
 _____ ft. below land surface. Date _____
 Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES
 Depth at which water was first found 12'

From	To	Estimated Flow Rate	SWL
12'	22'	5	5'
60'	159'	150 to 200	38'
277'	328'	500+	40' 6"

(12) WELL LOG Ground Elevation _____

Material	From	To	SWL
Top soil	0	5	
Brown clay	5	12	
Silty brown clay	12	23	
Brown and tan clay	23	30	
Very sandy tan clay with gravel	30	60	
Sandy brown tight gravel	60	81	
Very fine sandy gravel brown	81	86	
Medium to large semi-tight gravel with loose seams	86	111	
Tight large sand and gravel	111	134	
Red clay and gravel	134	139	
Tan sandy clay with gravel	139	147	
Weathered brown basalt	147	159	
Firm brown and gray basalt	159	161	
Gray basalt hard	161	208	

continued on page 2

Date Started 11/30/2005 Completed 2/3/2006

(unbonded) Water Well Constructor Certification
 I certify that the work I performed on the construction, deepening, 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 1629 Date 2/6/2006

Signed _____

(bonded) Water Well Constructor Certification
 I accept responsibility for the construction, deepening, 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 1273 Date 2/6/2006

Signed Floyd Sipp

RECEIVED
FEB 08 2006
WATER RESOURCES DEPT
SALEM, OREGON

STATE OF OREGON
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(12) WELL LOG Ground Elevation _____

Material	From	To	SWL
Black basalt	208	216	
Hard gray basalt	216	277	
Semi-fractured basalt	277	324	
Very porous semi-broken light gray basalt	324	328	

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WWC Number 1273 Date 2/6/2006

Signed Floyd Sippe

