

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

(1) LAND OWNER Roth Farms Well Number _____
Name Roth Farms
Address 12433 Hobart Rd NE
City Silverton State OR Zip 97381

(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 615 ft.
Explosives used: Yes No Type _____ Amount _____

BORE HOLE				SEAL			
Diameter	From	To	Material	From	To	Sacks or Pounds	
14"	0	315	Bentonite	0	7	4 sacks	
			Cement	7	315	102 sacks	
8"	315	615					

How was seal placed: Method A B C D E
 Other Bentonite Poured & Probed

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"	+1.5	315	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: None				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input 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 500 Drawdown N/A Drill stem at 315' Time 1 hr

Temperature of water 60 Depth Artesian Flow _____
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 1200 Lot _____
Township 6 S Range 1 W WM
Section 28 SE 1/4 NE 1/4
Lat _____° _____' _____" or _____ (degrees or decimal)
Long _____° _____' _____" or _____ (degrees or decimal)
Street Address of Well (or nearest address) S. of 12442 Hobart Rd.
Silverton, OR 97381

(10) STATIC WATER LEVEL
91' 8" ft. below land surface. Date 6/2/10
_____ ft. below land surface. Date _____
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES
Depth at which water was first found 27'

From	To	Estimated Flow Rate	SWL
27	112	DNM	DNM
375	615	500 gpm	91' 8"

(12) WELL LOG Ground Elevation _____

Material	From	To	SWL
Soll	0	1	
Clay Brown Medium	1	18	
Clay Blue Silty	18	27	
Gravel	27	39	
Gravel With Grey Clay	39	50	
Gravel With Brown Clay	50	95	
Sand With Wood	95	112	
Clay Blue	112	120	
Gravel With Clay	120	126	
Clay Grey	126	135	
Clay Blue Sticky	135	179	
Clay Blue-Green Med Gritty	179	220	
Clay Grey Brown & Green	220	241	
Clay Brown	241	280	
Clay Blue Gritty	280	295	
Weathered Rock Soft Brown	295	305	

Date Started 05/14/10 Completed 06/02/10

(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 1350 Date 06/03/10
Signed [Signature]

(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 698 Date 06/14/10
Signed [Signature]



