



**MARI 63385**  
**Westerberg Drilling, Inc.**  
**36728 S. Kropf Rd.**  
**Molalla, OR 97038**

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

WELL I.D. # L 101905

START CARD # 205918

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

(1) LAND OWNER Well Number Carlhaven West #1  
 Name City of Keizer  
 Address 930 Chemawa Rd NE  
 City Keizer State OR Zip 97307

(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 250 ft.  
 Explosives used:  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

BORE HOLE			SEAL			Sacks or Pounds
Diameter	From	To	Material	From	To	
20	0	20	bentonite	0	5	28 sacks
16	20	100	cement	-5	100	137 sacks
10	100	280	cement	254	280	11 sacks

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

Backfill placed from 280 ft. to 254 ft. Material cmnt 11 sacks  
 Gravel placed from 250 ft. to 254 ft. Size of gravel 6/9 c.s.s.

(6) CASING/LINER

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 10	+2	148	.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) 16" @ 94' cut off 10" @ 254' cut off

(7) PERFORATIONS/SCREENS  
 Perforations Method \_\_\_\_\_  
 Screens Type v wire Material S.S.

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
140	144	.010		10	ts	<input type="checkbox"/>	<input type="checkbox"/>
144	160	.030		10	ts	<input type="checkbox"/>	<input type="checkbox"/>
160	170	.100		10	ts	<input type="checkbox"/>	<input type="checkbox"/>
170	190	.080		10	ts	<input type="checkbox"/>	<input type="checkbox"/>
cont.	page 2					<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
750	100		44 hours

Temperature of water 56 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 200 Lot \_\_\_\_\_  
 Township 7 S Range 3 W WM  
 Section 2 SE 1/4 NW 1/4

Lat \_\_\_\_\_° \_\_\_\_\_' \_\_\_\_\_" or \_\_\_\_\_ (degrees or decimal)  
 Long \_\_\_\_\_° \_\_\_\_\_' \_\_\_\_\_" or \_\_\_\_\_ (degrees or decimal)

Street Address of Well (or nearest address)  
950 Brandon St, Keizer

(10) STATIC WATER LEVEL  
31' 11 1/4" ft. below land surface. Date 10-12-10  
 \_\_\_\_\_ ft. below land surface. Date \_\_\_\_\_  
 Artesian pressure n/a lb. per square inch Date \_\_\_\_\_

(11) WATER BEARING ZONES  
 Depth at which water was first found \_\_\_\_\_

From	To	Estimated Flow Rate	SWL
148	240	750	32

(12) WELL LOG Ground Elevation \_\_\_\_\_

Material	From	To	SWL
gravel fill	0	1	
soil brown dry	1	3	
clay & gravel brown	3	11	
gravel with clay brown	11	42	
clay brown	42	43	
cemented gravel with clay	43	61	
sand & grvl brn loosely cmted gry	61	76	
gravel with clay grey	76	78	
clay grey	78	92	
gravel with clay grey	92	96	
cemented grvl tight w/clay grey	96	148	
grvl crse w/sand brn & gry loose	148	150	
crse sand w/fine sand & grvl brn	150	152	
cemented gravel w/clay grey	152	174	
crse grvl cmted loosely no clay	174	182	
cont. page 2			

Date Started 6-23-10 Completed 10-25-10

(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 \_\_\_\_\_ Date \_\_\_\_\_

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 688 Date 11-15-10

Signed Steven M. Stadler

WATER RESOURCES DEPT SALEM, OREGON

**MAR 63285**  
**Westerberg Drilling, Inc.**  
**36728 S. Kropf Rd.**  
**Molalla, OR 97038**

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

WELL I.D. # L 101905

START CARD # 205918

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

(1) LAND OWNER Well Number **Carhaven West #1**  
 Name **City of Keizer**  
 Address **930 Chemawa Rd NE**  
 City **Keizer** State **OR** Zip **97307**

(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 \_\_\_\_\_ ft.  
 Explosives used:  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

BORE HOLE			SEAL			Sacks or Pounds
Diameter	From	To	Material	From	To	

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/Liner	Diameter	From	To	Gauge	Steel			
					Plastic	Welded	Threaded	
Casing:					<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"/>

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
cont. from page 1						<input type="checkbox"/>	<input type="checkbox"/>
190	220	.100		10	ts	<input type="checkbox"/>	<input type="checkbox"/>
220	240	.060		10	ts	<input type="checkbox"/>	<input type="checkbox"/>
240	250	.010		10	ts	<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

Temperature of water \_\_\_\_\_ 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 **200** Lot \_\_\_\_\_  
 Township **7** S Range **3** W WM  
 Section **2** SE 1/4 **NW** 1/4

Lat \_\_\_\_\_ " or \_\_\_\_\_ (degrees or decimal)  
 Long \_\_\_\_\_ " or \_\_\_\_\_ (degrees or decimal)

Street Address of Well (or nearest address) \_\_\_\_\_  
**950 Brandon St, Keizer**

(10) STATIC WATER LEVEL  
 \_\_\_\_\_ ft. below land surface. Date \_\_\_\_\_  
 \_\_\_\_\_ ft. below land surface. Date \_\_\_\_\_  
 Artesian pressure \_\_\_\_\_ lb. per square inch Date \_\_\_\_\_

(11) WATER BEARING ZONES  
 Depth at which water was first found \_\_\_\_\_

From	To	Estimated Flow Rate	SWL

(12) WELL LOG Ground Elevation \_\_\_\_\_

Material	From	To	SWL
cont. from page 1			
cemented gravel with clay	182	207	
silt grey	207	208	
gravel grey loose	208	215	
gravel brn med silty w/sand brn	215	240	
silt tan	240	243	
grvl tight cemented	243	245	
clay brn tan red marbled	245	249	
gravel with clay	249	258	
clay red brown stiff	258	280	

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Date Started **6-23-10** Completed **10-25-10**

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WWC Number \_\_\_\_\_ Date \_\_\_\_\_

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 **688** Date **11-15-10**

Signed *Steve N. Stahl*