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FEB 22 2012

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

WATER RESOURCES DEPT
SALEM, OREGON

WELL LABEL # L 104072

START CARD # 207942

(1) LAND OWNER

Owner Well I.D.

First Name KARNILY Last Name KALUGIN
Company
Address 10807 DUCK INN RD NE
City SALEM State OR Zip 97305

(2) TYPE OF WORK

(3) DRILL METHOD

Rotary Air Rotary Mud Cable Auger Cable Mud
Reverse Rotary Other

(4) PROPOSED USE

(5) BORE HOLE CONSTRUCTION

Table with columns: Dia, From, To, Material, SEAL, To, Amt, sacks/lbs

How was seal placed: Method A B C D E

Backfill placed from ft. to ft. Material
Filter pack from ft. to ft. Material Size
Explosives used: Yes Type Amount

(6) CASING/LINER

Table with columns: Casing, Liner, Dia, From, To, Gauge, Stil, Plstc, Wld, Thrd

Shoe Inside Outside Other Location of shoe(s) 161

Temp casing Yes Dia From To

(7) PERFORATIONS/SCREENS

Perforations Method Holte
Screens Type Material

Table with columns: Perf/S, Casing/Screen, Liner, Dia, From, To, Scrm/slot width, Slot length, # of slots, Tele/pipe size

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

Table with columns: Pump, Bailer, Air, Flowing Artesian, Yield gal/min, Drawdown, Drill stem/Pump depth, Duration (hr)

Temperature 53 F Lab analysis Yes By
Water quality concerns? Yes (describe below)

Table with columns: From, To, Description, Amount, Units

(9) LOCATION OF WELL (legal description)

County MARION Twp 5 S N/S Range 2 W E/W WM
Sec 35 NW 1/4 of the SW 1/4 Tax Lot 1500
Tax Map Number Lot
Lat Long
Street address of well Nearest address

11827 PORTLAND RD NE, GERVAIS, OR

(10) STATIC WATER LEVEL

Table with columns: Existing Well / Predeepening, Completed Well, Date, SWL(psi), SWL(ft)

WATER BEARING ZONES

Table with columns: SWL Date, From, To, Est Flow, SWL(psi), SWL(ft)

(11) WELL LOG

Table with columns: Material, From, To, Ground Elevation

Date Started 02-01-2012 Completed 02-15-2012

(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.

License Number 1629 Date 02-17-2012

Password: (if filing electronically)

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.

License Number 1273 Date 02-17-2012

Password: (if filing electronically)

Signed

Contact Info (optional)