STATE OF OREGON WATER SUPPLY WELL REPORT

MARI 64332

(ORS 537.765 & OAR 690-205-0210) Instructions for completing this report are on the last page of this form.

WELL LABEL # L 101378 START CARD# 10/7/83 ORIGINAL LOG#

(1) LANDOWNER Owner Well I.D. First Name Last Name RUIZ	(9) LOCATION OF WELL (legal description) County MARION Twp 6 N of 9 Range 2 E of W
ompany Address / 0855 PORTLAND Rd N.E.	Sec
City SALEM State OR Zip 97305	Tax Map Number 062W08 0030 ot
(2) TYPE OF WORK New Conversion Deepening	Lat° DMS or Long ° DMS or DMS or
☐ Alteration (complete Sections 2a & 10) ☐ Abandonment (complete Section 5a)
(2a) PRE-ALTERATION: Well Doom 127 ft.	Street Address of Well (or nearest address) 4896 Wacowsa Rd
Seal Material Benjavite Chip	WE KEIZER, OR 97303
Casing Type: Steel Plastic Other	(10) STATIC WATER LEVEL
Casing Gauge Casing Diameter	Date SWL(psi) + SWL (fi
(3) DRILL METHOD	Completed Well / 27 9/2/12 29 29 Flowing Artesiar? Yes Dry Hole? Yes
(4) PROPOSED USE Domestic Pringation Community	WATER BEARING ZONES Depth water was first found 108
(4) PROPOSED USE ☐ Domestic ☐ Irrigation ☐ Community ☐ Industrial/Commercial ☐ Livestock ☐ Dewatering ☐ Injection	SWL Date From To Est Flow SWL (psi) + SWL (ft
☐ Thermal ☐ Other	9
(5) BORE HOLE CONSTRUCTION	8-1-12 108 127 300 29
Depth of Completed Well 127 ft. Special Standard: Yes (attach copy)	
BORE HOLE SEAL	
Dia From To Material From To Amount Sck. 14 0 40 43	bs (11) WELL LOG Ground Elevation /.3 4.5
14 0 40 BANTONITE 0 40 43	Material From To
1.5 16 16 1	TOPSOIL 0 3
	BROWN CLAY 3 14
How was seal placed: Method	COURSE BLACK GROWN 49 54
Backfill placed fromft. toft. Material	EINE BLUE CLAY 54 48
ilter pack from ft. to ft. Material Size	COURSE GRAVAL 68 79
	FINE BLUE CLAY 79 108 FINE BLOCK SANT 108 127
(5a) ABANDONMENT USING UNHYDRATED BENTONITE:	AND GRAVEL WB
Calculated Amount Proposed to be Used:sacks/lbs Actual Amount Used:sacks/lbs	
Actual Amount Oscu,sacks/10:	
(6) CASING/LINER	
Csn Linr Dia + From To Gauge Steel Plastic Welded Three	<u> </u>
10 ata 40 250 V	
8 0 120 250	Date Started 7/23/12 Completed 8-2-12
Shoe Inside Outside Other Location of shoe(s)	(unbonded) Water Well Constructor Certification I certify that the work I performed on the construction, deepening, alteration
Temporary casing	about the phent of this well is in compliance with Oregon water supply well
(7) PERFORATIONS/SCREENS Perforations Method Factory 340 14x HECENED B	Y Construction standards. Materials used and AFG Matth appointed and true the best of my knowledge and belief.
Perforations Method Factory 340 4x SECENEE	the best of my knowledge and benefit.
Screens Type Material	1 100 Lense Number S E Re 1 9 2012
Screens TypeMaterial	E/ Signed
	Mounded) Water Well Constructor Certification EM, OR
Perf Scrn Csng Linr Dia From To width length slots size	I accept responsibility for the construction, deepening, alteration, or
	abandonment work performed on this well during the construction dates reporte
	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 knowle and belief.
(8) WELL TESTS: Minimum testing time is 1 hour Pump Bailer Air Flowing Artesian	License Number 500 Date 8-24-201
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	Signed Signed
emperature 57 °F Lab analysis Yes By	Contact Info. (optional)
Water quality concerns? Yes (describe below) TDSppm	
From To Description Amount Units	

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WELL LABEL # L 101378 START CARD # 101718 Instructions for completing this report are on the last page of this form. ORIGINAL LOG# (1) LANDOWNER Owner Well I.D. (9) LOCATION OF WELL (legal description) Last Name RVI First Name _____ \$\forall F \forall F County MARION Twp 6 N 69 Range 2 'ompany Sec _ & NE 1/4 of the NE 1/4 Tax Lot R18.350 Zip 97305 Tax Map Number 062 W08 0030001 State BR (2) TYPE OF WORK New Conversion Deepening DMS or DD ☐ Alteration (complete Sections 2a & 10) ☐ Abandonment (complete Section 5a) Street Address of Well (or nearest address) 4896 Wacowda Rd (2a) PRE-ALTERATION: Well Dopth / 27 KEIZER, OR 97303 Seal Material Casing Type: Steel Other (10) STATIC WATER LEVEL Casing Diameter Casing Gauge SWL(psi) SWL (ft) Existing Well/Pre-Alteration (3) **DRILL METHOD** ☐ Rotary Air ☐ Rotary Mud ☐ Auger 8/2/12 Completed Well / 27 Cable Cable Mud Reverse Rotary Other Flowing Artesiarf? Yes Dry Hole? Yes WATER BEARING ZONES Depth water was first found ☐ Domestic Irrigation (4) PROPOSED USE ☐ Community ☐ Livestock ☐ Industrial/Commercial ☐ Dewatering ☐ Injection SWL Date From Est Flow SWL (psi) + SWL (ft) ☐ Thermal ☐ Other 8-1-12 (5) BORE HOLE CONSTRUCTION *360* 29 Depth of Completed Well 127 ft. Special Standard: Yes (attach copy) **BORE HOLE** Amount Sck /lbs Dia From To Material From To (11) WELL LOG Ground Elevation /3 4.5 BANTENITE Material 49 Method A B C D How was seal placed: DOther FOURED DRY Backfill placed from ilter pack from ft. Material 108 127 (5a) ABANDONMENT USING UNHYDRATED BENTONITE: GRAUEL Calculated Amount Proposed to be Used: sacks/lbs Actual Amount Used: sacks/lbs (6) CASING/LINER Gauge | Steel | Plastic | Welded | Thrd Linr Dia + From Date Started 7/23/12 Completed 8-2-12 (unbonded) Water Well Constructor Certification Shoe Inside Outside Other Location of shoe(s) I certify that the work I performed on the construction, deepening, alteration, or Temporary casing Yes Diameter _ hent of this well is in compliance with Oregon water supply well From AECEIVED BY nstruction standards. Materials used and information reported above are true to (7) PERFORATIONS/SCREENS the best of my knowledge and belief. Method FACTORY Perforations Micense Number Screens Material AUG Tele Screen/ Signed #of Screen slot Slot (bonded) Water Well Constructor Certification Perf | Scrn | Csng | Linr | Dia From width length slots 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. (8) WELL TESTS: Minimum testing time is 1 hour 0 Date 8-24-2012 ☐ Flowing Artesian ☐ Air Drawdown | Drill stem/Pump depth | Yield gal/min Duration (hr) Contact Info. (optional) a`emperature عنا F Lab analysis 🗆 Yes By_ Water quality concerns? Yes (describe below) TDS ppm Description From Amount Units