

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

JUN 11 2013

WELL LABEL # L 111604

START CARD # 208965

SALEM, OR

(1) LAND OWNER Owner Well I.D. _____

First Name Bill Last Name Luak
Company _____
Address 15871 River Rd. NE
City St. Paul State OR Zip 97137

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

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

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

(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)
Depth of Completed Well 280 ft.

BORE HOLE			SEAL			Amt	sacks/ lbs
Dia	From	To	Material	From	To		
20	0	37	Bentonite	0	37	35	
16	37	280					

How was seal placed: Method A B C D E
 Other 690-210-0340

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

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16		2	251.75	.375	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	12		223.66	280	.250	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Shoe Inside Outside Other Location of shoe(s) 251.75
Temp casing Yes Dia _____ From _____ To _____

(7) PERFORATIONS/SCREENS

Perforations Method _____
Screens Type v wire Material stainless

Perf/ Screen	Casing/ Liner	Screen Dia	From	To	Scrns/slot width	Slot length	# of slots	Tele/ pipe size
Screen		12	254	274.33	.225			12

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
750	102.5		2
750	103.5		5

Temperature 53 °F Lab analysis Yes By _____
Water quality concerns? Yes (describe below)
From _____ To _____ Description _____ Amount _____ Units _____

(9) LOCATION OF WELL (legal description)

County MARION Twp 5 S N/S Range 3 W E/W WM
Sec 12 NE 1/4 of the SW 1/4 Tax Lot 600
Tax Map Number _____ Lot _____
Lat _____ " or _____ DMS or DD
Long _____ " or _____ DMS or DD
 Street address of well Nearest address
15871 River Road NE St. Paul, OR 97137

(10) STATIC WATER LEVEL

Existing Well / Prodeepening	Date	SWL(psi)	+ SWL(ft)
Completed Well	<u>04-12-2013</u>		<u>50.9</u>

Flowing Artesian? Dry Hole?

WATER BEARING ZONES

Depth water was first found 148

SWL Date	From	To	Est Flow	SWL (psi)	+ SWL (ft)
01-24-2013	148	154	40		57
01-28-2013	201	206	20		52
02-06-2013	252	274	750		52

(11) WELL LOG

Ground Elevation _____

Material	From	To
Topsail	0	2
Clay brown	2	32
Clay blue silty	32	58
Clay dark gray silty, some fine sand	58	71
Clay dark gray	71	94
Sand, gravel & clay brown	94	105
Clay brown silty	105	114
Clay green sticky	114	119
Clay gray & green	119	129
Clay gray silty soft	129	133
Clay green sticky	133	137
Clay green & gray	137	148
Sand, gravel & silt	148	151
Silt gray w/short seams of sand	151	154
Clay green	154	168
Clay blue sticky	168	178
Clay gray sticky	178	193
Clay gray silty	193	201
Sand black fine silty	201	206

Date Started 01-11-2013 Completed 05-13-2013

(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.

License Number 1704 Date _____
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. 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.

License Number 783 Date 6/10/13
Password: (if filing electronically) _____
Signed [Signature]
Contact Info (optional) Grossen Well Drilling (503)982-2060

(5) BORE HOLE CONSTRUCTION

BORE HOLE **SEAL** **SALEM, OR**

Dia	From	To	Material	From	To	Amt	Lbs

FILTER PACK

From	To	Material	Size

(6) CASING/LINER

Casing Liner	Dia	+	From	To	Gauge	Stl	Platc	Wld	Thrd

(7) PERFORATIONS/SCREENS

Perf/ Screen	Casing/ Liner	Screen Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ pipe size

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

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)

Water Quality Concerns

From	To	Description	Amount	Units

(10) STATIC WATER LEVEL

Water Bearing Zones

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)

(11) WELL LOG

Material	From	To
Clay blue & brown silty	206	213
Clay dark gray silty	213	222
Clay blue sticky	222	231
Clay green sticky	231	236
Clay green soft	236	239
Clay green hard sticky	239	244
Clay gray sandy	244	252
Gravel (60-70%)& sand	252	268
Sand black (90%)& gravel	268	270
Gravel (60%)& sand	270	274
Clay gray & green sticky	274	280

Comments/Remarks

Bottom plate at 280'
Lifting bail at 278' 6"