STATE OF OREGON WATER SUPPLY WELL REPORT (as required by ORS 537.765 & OAR 690-205-0210) MARI 65221

5/9/2014

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WELL I.D. LABEL# L	114791	
START CARD#	1022841	
ORIGINAL LOG #		

(1) LAND OWNER Owner Well I.D.			
First Name Last Name	(9) LOCATION OF WELL (legal description)		
Company SALEM NURSERY	County MARION Twp 4.00 S N/S Range 1.00 W E/	W WM	
Address 5050 SE STARK RD	Sec 12 NW 1/4 of the SE 1/4 Tax Lot 100		
City PORTLAND State OR Zip 97215	Tax Man Number Lot		
(2) TYPE OF WORK New Well Deepening Conversion	Tax Map Number Lot Lat " or	or DD	
Alteration (complete 2a & 10) Abandonment(complete 5a)	Long or DMS or	or DD	
(2a) PRE-ALTERATION Dia + From To Gauge Stl Plstc Wld Thrd	Street address of well Nearest address		
Casing:	22256 AIRPORT RD		
Material From To Amt sacks/lbs			
Seal:			
(3) DRILL METHOD	(10) STATIC WATER LEVEL		
Rotary Air Rotary Mud Cable Auger Cable Mud	Date SWL(psi) + SWL(f	it)	
Reverse Rotary Other	Existing Well / Pre-Alteration		
	Completed Well 5/9/2014 82 Flowing Artesian? Dry Hole?		
(4) PROPOSED USE Domestic X Irrigation Community			
Industrial/Commericial Livestock Dewatering	WATER BEARING ZONES Depth water was first found 100.00		
Thermal Injection Other	SWL Date From To Est Flow SWL(psi) + SWL((ft)	
(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy	4/21/2014 100 137 140 82	,	
Depth of Completed Well 210.00 ft.	4/21/2014 160 170 150 82		
BORE HOLE SEAL sacks/	4/22/2014 180 200 110 82		
Dia From To Material From To Amt 1bs	4,22,2014 100 200 110		
16 0 50 Cement 0 50 3200 P			
8 50 210			
	(11) WELL LOG Ground Flavotion		
	Glouild Elevation	-	
How was seal placed: Method A B XC D E	Material From To		
Other	Top soil 0 2		
Backfill placed from ft. to ft. Material	Brown silty clay 2 100		
Filter pack from ft. to ft. Material Size	Sand & gravel 100 137 Black sand 137 140		
Explosives used: Yes Type Amount	Black sand 137 140 Gray clay 140 160		
(5a) ABANDONMENT USING UNHYDRATED BENTONITE	Multi colored sand 160 170		
Proposed Amount Actual Amount	Gray clay 170 180		
	Sandstone 180 200		
(6) CASING/LINER Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd	Blue clay 200 210		
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd 8 X 2.5 210 250 (•) (X			
8 2.3 210 230 3 0 6 0 160 200 0 0			
Shoe Inside Other Location of shoe(s) 210			
Temp casing X Yes Dia 12 From 0 To 50			
(7) PERFORATIONS/SCREENS			
Perforations Method Mills knife	D. G 1440/2014		
Screens Type Alloy machine works Material Stainless sttel	Date Started4/18/2014 Complete <u>5/8/2014</u>		
Screen Liner Dia From To width length slots pipe size	(unbonded) Water Well Constructor Certification		
Perf Casing 8 102 137 .25 2 365	I certify that the work I performed on the construction, deepening, alterat	ion, or	
Perf Casing 8 160 170 .25 2 260	abandonment of this well is in compliance with Oregon water supply		
Perf Casing 8 180 200 .25 2 360	construction standards. Materials used and information reported above are	true to	
Screen Liner 7.75 160 210 .1	the best of my knowledge and belief.		
	License Number Date		
(8) WELL TESTS: Minimum testing time is 1 hour			
Pump Bailer (•) Air Flowing Artesian	Signed		
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	(bonded) Water Well Constructor Certification		
400 210 2	I accept responsibility for the construction, deepening, alteration, or aband	lonment	
	work performed on this well during the construction dates reported above. All work		
	performed during this time is in compliance with Oregon water supp		
Temperature 58 °F Lab analysis Yes By	construction standards. This report is true to the best of my knowledge and b		
Water quality concerns? Yes (describe below) TDS amount	License Number 1771 Date 5/9/2014		
From To Description Amount Units			
	Signed GEORGE YOUNGBERG (E-filed)		
	Contact Info (optional) Youngberg pump & well drilling ph.503-630-3970		