

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

WELL I.D. LABEL# L 132853  
 START CARD # 215109  
 ORIGINAL LOG #

**(1) LAND OWNER** Owner Well I.D. \_\_\_\_\_  
 First Name Bruce Last Name Ernst  
 Company Ernst Nursery & Farms  
 Address PO Box 460  
 City St. Paul State OR Zip 97137

**(2) TYPE OF WORK**  New Well  Deepening  Conversion  
 Alteration (complete 2a & 10)  Abandonment (complete 5a)

**(2a) PRE-ALTERATION**  
 Dia + From To Gauge Stl Plstc Wld Thrd  
 Casing:            
 Material From To Amt sacks/lbs  
 Seal:

**(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 95 ft.  
 BORE HOLE SEAL sacks/lbs  

Dia	From	To	Material	From	To	Amt	lbs
16	0	34	Bentonite Chips	0	34	34	S
12	34	95				Calculated	26
						Calculated	

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 \_\_\_\_\_

**(5a) ABANDONMENT USING UNHYDRATED BENTONITE**  
 Proposed Amount Pounds Actual Amount Pounds

**(6) CASING/LINER**  

Casing	Liner	Dia	+ From To Gauge	Stl	Plstc	Wld	Thrd
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12	<input checked="" type="checkbox"/> 1.5 58.14 .25	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	10	<input checked="" type="checkbox"/> 2.96 95 .25	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

  
 Shoe  Inside  Outside  Other Location of shoe(s) 58.14  
 Temp casing  Yes Dia \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

**(7) PERFORATIONS/SCREENS**  
 Perforations Method \_\_\_\_\_  
 Screens Type V-wire Material stainless steel  

Perf/S	Casing/Screen	Dia	From To	Scrnm/slot width length	Slot # of slots	Tele/ pipe size
Screen		10	69.75 90	.08		10

**(8) WELL TESTS: Minimum testing time is 1 hour**  
 Pump  Bailer  Air  Flowing Artesian  

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
200	48.5		4

  
 Temperature 53 °F Lab analysis  Yes By \_\_\_\_\_  
 Water quality concerns?  Yes (describe below) TDS amount 87  

From To	Description	Amount	Units

**(9) LOCATION OF WELL (legal description)**  
 County MARION Twp 4 S N/S Range 2 W E/W WM  
 Sec 4 SW 1/4 of the SE 1/4 Tax Lot 1100  
 Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_  
 Lat \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD  
 Long \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD  
 Street address of well  Nearest address  
6180 Gearin Road NE, St. Paul, OR 97137

**(10) STATIC WATER LEVEL**  

Existing Well / Pre-Alteration	Date	SWL(psi)	+ SWL(ft)
Completed Well	03-21-2019		

  
 Flowing Artesian?  Dry Hole?   
 WATER BEARING ZONES Depth water was first found 76  

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
09-28-2018	76	90			21

**(11) WELL LOG** Ground Elevation \_\_\_\_\_  

Material	From	To
Clay, brown	0	5
Silt, brown	5	19
Silt, greenish gray	19	32
Clay, greenish gray, sand	32	38
Clay, greenish gray	38	42
Clay, gray	42	52
Sand, black, silt, dark gray	52	76
Sand, black, silt, layers, dark gray	76	90
Clay, dark greenish gray	90	93
Clay, blueish gray	93	95

  
 RECEIVED  
 JUN 26 2019  
 OWRD

Date Started 09-28-2018 Completed 03-19-2019  
**(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 04-12-2019  
 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 04-12-2019  
 Signed Joan Grosser  
 Contact Info (optional) \_\_\_\_\_

