

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

MARI 69564

12/22/2020

WELL I.D. LABEL# L 139140
START CARD # 1050050
ORIGINAL LOG #

(1) LAND OWNER
Owner Well I.D.
First Name MARTY Last Name JOHNSON
Company
Address 1659 95TH AVENUE N.E.
City SALEM State OR Zip 97317

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

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

(3) DRILL METHOD
Rotary Air [X] Rotary Mud [ ] Cable [ ] Auger [ ] Cable Mud [ ]
Reverse Rotary [ ] Other [ ]

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

(5) BORE HOLE CONSTRUCTION
Special Standard [ ] (Attach copy)
Depth of Completed Well 290.00 ft.
BORE HOLE
Dia From To Material From To Amt sacks/lbs

How was seal placed: Method [ ] A [ ] B [X] C [X] D [ ] E
[X] Other BENTONITE DRY
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 Actual Amount

(6) CASING/LINER
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrld
Shoe [ ] Inside [ ] Outside [ ] Other Location of shoe(s)
Temp casing [X] Yes Dia 12 From + 0 To 64.75

(7) PERFORATIONS/SCREENS
Perforations Method
Screens Type Material
Perf/ Casing/ Screen Scrn/slot Slot # of Tele/
Screen Liner Dia From To width length slots pipe size

(8) WELL TESTS: Minimum testing time is 1 hour
Pump [ ] Bailer [ ] Air [X] Flowing Artesian [ ]
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)

Temperature 52 °F Lab analysis [ ] Yes By
Water quality concerns? [ ] Yes (describe below) TDS amount 100 ppm
From To Description Amount Units

(9) LOCATION OF WELL (legal description)
County MARION Twp 7.00 S N/S Range 2.00 W E/W WM
Sec 24 SE 1/4 of the NE 1/4 Tax Lot 800
Tax Map Number Lot
Lat " or 44.94919000 DMS or DD
Long " or -122.86920000 DMS or DD
Street address of well [X] Nearest address [ ]
1659 95TH AVENUE N.E., SALEM, OR 97317

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Pre-Alteration
Completed Well 12/18/2020 24
Flowing Artesian? [ ] Dry Hole? [ ]

WATER BEARING ZONES
Depth water was first found 22.00
SWL Date From To Est Flow SWL(psi) + SWL(ft)
11/23/2020 22 55 50 18
12/11/2020 125 194 150 24
12/18/2020 250 285 350 24

(11) WELL LOG
Ground Elevation
Material From To
Top soil 0 2
Sticky brown clay 2 14
Silty brown clay 14 22
Medium gravel and brown clay 22 38
Gravel and gray clay 38 52
Gravel and red clay 52 55
Yellow and tan decomposed basalt 55 62
Brown weathered basalt 62 88
Light brown weathered basalt 88 101
Fractured gray basalt w/red claystone 101 125
Fractured gray basalt w/weathered seams 125 140
Broken blue basalt caving 140 163
Gray basalt w/weathered seams 163 173
Dark gray basalt w/green seams 173 194
Medium gray basalt w/dark gray seams 194 222
Dark gray basalt 222 250
Fractured dark gray basalt w/green seams 250 279
Broken dark gray basalt 279 285
Light gray clay 285 290

Date Started 11/20/2020 Completed 12/18/2020

(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 1903 Date 12/22/2020
Signed RYAN PILLSBURY (E-filed)

(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 1273 Date 12/22/2020
Signed FLOYD SIPPEL (E-filed)
Contact Info (optional)