WELL I.D. LABEL#4 Handonmen PO BOX 1228 STATE OF OREGON START CARD# 217163 WATER SUPPLY WELL REPORT (as required by ORS 537.545 & 537.765 and OAR 690-205-0216) MOLALLA, OR 97038 LAND OWNER ORIGINAL LOG# MARION 1707 (1) LAND OWNER Owner Well I.D. First Name Last Name (9) LOCATION OF WELL (legal description) Company I & E Construction/Woodburn Apartments County MARION ___ Twp_5___S__N/S Range 1 Address 27375 SW Parkway Ave Sec 9 1/4 of the NW __ 1/4 Tax Lot <u>900</u> City Wilsonville Zip 97070 State OR Tax Map Number New Well (2) TYPE OF WORK Deepening Conversion " or DMS or DD Abandonment(complete 5a) or or DMS or DD (2a) PRE-ALTERATION Street address of well Nearest address Casing: 2145 Molalla Rd, Woodburn, OR Material Seal: (3) DRILL METHOD (10) STATIC WATER LEVEL SWL(psi) Rotary Air Rotary Mud Cable Auger Cable Mud Existing Well / Pre-Alteration Reverse Rotary Other Completed Well (4) PROPOSED USE Flowing Artesian? Industrial/ Commericial Livestock Dewatering WATER BEARING ZONES Depth water was first found Thermal Injection X Other abandonment SWL Date To Est Flow SWL(psi) + SWL(ft) (5) BORE HOLE CONSTRUCTION Special Standard (Attach copy) Depth of Completed Well 0 **BORE HOLE** SEAL Dia From Material From To Amt lbs 139 47 Calculated 32 (11) WELL LOG Ground Elevation How was seal placed: ⊠c Method В Material From To Other. This well had a pump droppped in it. Backfill placed from . ft. to ___ ft. Material After fishing it out we perforated casing & Filter pack from _ ft. to ____ ft. Material abandoned with cement grout. Size Owner will cut off casing 5 ft below ground & cover Explosives used: Yes Type_ Amount (5a) ABANDONMENT USING UNHYDRATED BENTONITE Proposed Amount **Pounds** Actual Amount (6) CASING/LINER Casing Liner Dia From T_0 Inside | Outside Other Location of shoe(s) Temp casing Yes Dia From (7) PERFORATIONS/SCREENS
Perforations Method Mills Knife & Air Push Down Screens Type_ Date Started 01-17-2022 Material __Completed <u>01-19-2022</u> Perf/S Casing/ Screen # of Tele/ Scm/slot Slot (unbonded) Water Well Constructor Certification Liner Dia From width ieneth slots pipe size Casing 126 I certify that the work I performed on the construction, deepening, alteration, or .25 1.25 2.722 126 134 25 abandonment of this well is in compliance with Oregon water supply well 96 construction standards. Materials used and information reported above are true to the best of my knowledge and belief. License Number (8) WELL TESTS: Minimum testing time is 1 hour Signed O Pump O Bailer O Air O Flowing Artesian (bonded) Water Well Constructor Certification Drill stem/Pump depth Duration (hr) Drawdown 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. °F Lab analysis Yes By. Temperature Yes (describe below) TDS amount Water quality concerns? License Number Amount Units Description Contact Info (optional)

BERGEORIZLING INC.