

Amended 11/3/2025
STATE OF OREGON
WATER SUPPLY WELL REPORT

MARI 71811

WELL I.D. LABEL# L 155832
START CARD # 1079211
ORIGINAL LOG # MARION 5075

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9/9/2025

(as required by ORS 537.545 & 537.765 and OAR 690-205-0210)

(1) LAND OWNER

Owner Well I.D. DR-3801

First Name _____ Last Name _____
Company CHAPIN ORCHARDS LLC.
Address P. O. BOX 9406
City SALEM State OR Zip 97305

(2) TYPE OF WORK

☐ New Well ☒ Deepening ☐ Conversion
☒ Alteration (complete 2a & 10) ☐ Abandonment (complete 5a)

(2a) PRE-ALTERATION

Casing: Dia + From To Gauge Stl Plstc Wld Thrd
10 0 32 0.250 ☒ ☐ ☒ ☐
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 178.00 ft.

BORE HOLE			SEAL				sacks/
Dia	From	To	Material	From	To	Amt	lbs
16	0	19	Bentonite	0	19	23	S
10	19	182			Calculated	21.89	
					Calculated		

Seal placement method: ☐ A ☐ B ☐ C ☐ D ☐ E ☒ Other: POURED DRY

Backfill placed from _____ ft. to _____ ft. Material _____

Filter pack from _____ ft. to _____ ft. Material _____ Size _____

Explosives used: ☐ Type _____ Amount _____

Seal Placement Begin Date 8/23/2025 Begin Time 17:00

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount _____ Actual Amount _____

(6) CASING/LINER

C/L	Dia	+ From To	Gauge	Mat. Type	Wld	Thrd	Shoe	Location
C	10	<input checked="" type="checkbox"/> 2.4 178	0.250	ST	<input checked="" type="checkbox"/>		IN.	178

Temp casing ☐ Yes Dia _____ From+ _____ To _____

(7) PERFORATIONS/SCREENS

Perforations Method Holte Air Perforator

Screens Type _____ Material _____

Perf/ Screen	Casing/ Liner	Screen Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ Pipe size
Perf	Casing	10	159	176	.25	1	816	

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

Type of Test	Yield (gal/min)	Drawdown	Drill Stem/ Pump Depth	Duration (hr)
Air	850		175	3

Temperature 53 °F Lab analysis ☐ Yes By _____

Water quality concerns? ☐ Yes (describe below) TDS amount 86 ppm
From To Description Amount Units

(9) LOCATION OF WELL (legal description)

County MARION Twp 6.00 S N/S Range 3.00 W E/W WM

Sec 23 NW 1/4 of the NW 1/4 Tax Lot 100

Tax Map Number _____ Lot _____

Lat _____ " or 45.04217366 DMS or DD

Long _____ " or -123.02997595 DMS or DD

☐ Street address of well ☒ Nearest address

SE OF: 700 SALMON ST. N.

SALEM OR. 97303

(10) STATIC WATER LEVEL

	Date	SWL (psi)	+	SWL (ft)
Existing Well / Pre-Alteration	8/23/2025			28
Completed Well	9/6/2025			28

Flowing Artesian? ☐ Dry Hole? ☐

WATER BEARING ZONES

Depth water was first found 64.00

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
9/2/2025	64	99	30			28
9/3/2025	99	182	850			28

(11) WELL LOG

Ground Elevation 123.17 FT

Material	From	To
Existing Borehole (Alluvial Soil)	0	2
Existing Borehole (Brown Clay)	2	15
Existing Borehole (Gravel & Boulders)	15	32
Gravel Brown Cemented w/ Cobbles	32	37
Gravel w/ Silt Gray Sandy	37	49
Gravel Medium w/ Sand Brown	49	64
Gravel Cemented Brown Sandy	64	78
Gravel Large w/ Some Sand	78	94
Gravel Small w/ Sand Brown/Black	94	109
Sand Black Silty w/ Some Gravel-Heaving Heavily	109	127
Gravel Black Sandy	127	129
Sand Black w/ Wood-Heaving Heavily	129	153
Gravel Large w/ Some Sand Black	153	175
Cobbles Large Black/Blue Layered	175	182

Construction

Begin Date 8/23/2025 Begin Time 15:00 End Date 9/6/2025

(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 1974 Date 9/9/2025

Signed CJ NUGENT (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 664 Date 9/9/2025

Signed CHARLES NUGENT (E-filed)

Drilling Company: Nugent Drilling Co. Lebanon OR. 541-258-7816

ORIGINAL - WATER RESOURCES DEPARTMENT

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version:

New exempt use wells must be submitted with a map and recording fee.

WATER SUPPLY WELL REPORT - Map with location identified must be attached and shall include an approximate scale and north arrow

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Map of Hole

