

STATE OF OREGON
WATER SUPPLY WELL REPORT

MARI 72120

WELL I.D. LABEL# L

141634

START CARD #

1081574

ORIGINAL LOG #

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

5/12/2026

(1) LAND OWNER

Owner Well I.D. _____

First Name PAUL

Last Name KNOPP

Company _____

Address 10499 CHAMPOEG RD NE

City AURORA

State OR

Zip 97002

(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
					☐	☐	☐	☐
Material				From	To	Amt sacks/lbs		

Seal:

Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
					☐	☐	☐	☐

(3) DRILL METHOD

☐ Rotary Air ☐ Rotary Mud ☒ Cable ☐ Auger

☐ 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 170.83 ft.

BORE HOLE				SEAL				sacks/lbs
Dia	From	To	Material	From	To	Amt		
10	0	35	Bentonite Chips	0	35	19	S	
6	35	170.83			Calculated	17.7		
					Calculated			

Seal placement method: ☐ A ☐ B ☐ C ☐ D ☐ E ☒ Other: OAR 690-210-0340

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

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

Explosives used: ☐ Type _____ Amount _____

Seal Placement Begin Date 3/24/2026 Begin Time 14 : 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	6	☒	1.5	156	0.250	ST	☒		OUT.	156
C	5		154.16	157.66	0.188	ST	☒			
C	5		167.83	170.83	0.188	ST	☒			

Temp casing ☐ Yes Dia _____ From + ☐ _____ To _____

(7) PERFORATIONS/SCREENS

Perforations Method _____

Screens Type v wire _____ Material stainless steel

Perf/ Screen	Casing/ Liner	Screen Dia	From	To	Scrm/slot width	Slot length	# of slots	Tele/ Pipe size
Screen	Casing	6	157.66	167.83	.014			Telescope

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

Type of Test	Yield (gal/min)	Drawdown	Drill Stem/ Pump Depth	Duration (hr)
Air	300		150	4

Temperature 54 °F Lab analysis ☐ Yes By _____

Water quality concerns? ☐ Yes (describe below) TDS amount 95 ppm

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County MARION Twp 4.00 S N/S Range 2.00 W E/W WM

Sec 34 NW 1/4 of the NW 1/4 Tax Lot 1000

Tax Map Number _____ Lot _____

Lat _____ ° _____ ' _____ " or 45.18631909 DMS or DD

Long _____ ° _____ ' _____ " or -122.92720986 DMS or DD

☒ Street address of well ☐ Nearest address

6553 KINNS RD NE WOODBURN, OREGON

(10) STATIC WATER LEVEL

	Date	SWL (psi)	+	SWL (ft)
Existing Well / Pre-Alteration				
Completed Well	4/14/2026			16
Flowing Artesian?	☐			
Dry Hole?	☐			

WATER BEARING ZONES

Depth water was first found 80.00

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
3/27/2026	80	85	50			24
3/30/2026	117	125	10			24
4/1/2026	152	166	80			22

(11) WELL LOG

Ground Elevation 159.35 FT

Material	From	To
top soil	0	2
brown clay medium	2	18
brown clay sticky hard	18	53
brown silt and sand hard tight	53	62
grey clay sticky	62	77
dark grey silt and fine sand	77	80
black sand and gravel heaves	80	85
blue grey clay hard sticky	85	103
grey clay sandy hard	103	117
green grey silt sandy	117	125
grey clay medium	125	131
darnk grey silt sandy	131	135
grey clay sticky hard	135	144
grey silt	144	152
dark grey silt and fine black sand	152	155
black sand clean heaves	155	162
black sand and gravel 30- 40% gravel	162	166
green grey clay medium	166	170.83

Construction

Begin Date 3/23/2026 Begin Time 13 : 52 End Date 4/14/2026

(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 2041 Date 4/21/2026

Signed TRAVIS RUSH (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 783 Date 5/12/2026

Signed IVAN GROSSEN (E-filed)

Drilling Company: grossen well drilling

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

MARI 72120

5/12/2026

Map of Hole

STATE OF OREGON WELL LOCATION MAP

This map is supplemental to the WATER SUPPLY WELL REPORT

Oregon Water Resources Department

725 Summer St NE, Salem OR 97301
(503)986-0900



LOCATION OF WELL

Latitude: 45.18631909 Datum: WGS84

Longitude: -122.92720986

Township/Range/Section/Quarter-Quarter Section:

WM4.00S2.00W34NWNW

Address of Well:

6553 KINNS RD NE WOODBURN, OREGON

Well Label: 141634

Printed: May 12, 2026

DISCLAIMER: This map is intended to represent the approximate location the well. It is not intended to be construed as survey accurate in any manner.

Provided by well constructor

