

NOV 13 2000

MORR
50791

WELL I.D. # 41909
START CARD # 91432

STATE OF OREGON
WATER SUPPLY WELL PERMIT
(As required by ORS 297.105)
WATER RESOURCES DEPT.
SALEM, OREGON

(1) OWNER: R D OFFUTT CO Well Number _____
Name R D OFFUTT CO
Address 75906 Threemile Rd
City Bend State OR Zip 97708

(2) TYPE OF WORK
 New Well Deepening Alteration (repair/recondition) Abandonment

(3) DRILL METHOD:
 Rotary Air Rotary Mud Cable Other

DRAFT

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Hotrock Other

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 815 ft.
Explosives used Yes No Type _____ Amount _____

DIAMETER		MATERIAL		SEAL		SOLIDS or PRESENT	
Diameter	From To	Material	From To	Seal	To	Solids or present	
20	0	104 cement	70	112		200	545
16	104	72	545			48	545
12	472	815				14	445

How was seal placed: Method A B C D E
 Other Dry pellet Encapsulation
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Casing	Diameter	From	To	Gauge	Material			
					Steel	Plastic	Welded	Threaded
	16	0	104	250				
	12	0	472					

Liner: _____

Final location of shoe(s) 104

(7) PERFORATIONS/SCREENS:

From	To	Method		Material		Casing	Liner
		Type	Screen	Size	Mesh		

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

Pump Bailor Air Flowing Artesian
Yield gallons _____ Drawdown _____ Drill stem at _____ Time _____ l/hr

Temperature of water 68 Depth Artesian Flow Found _____

Was a water analysis done? Yes By whom: _____
Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Oily Colored Other SANDY
Depth of strata: 545-423

(9) LOCATION OF WELL by legal description:
County Marion Latitude _____ Longitude _____
Township 3 or S Range 23 or W. WM
Section 26 SW 1/4 NE 1/4
Tax Lot 100 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) SAME

(10) STATIC WATER LEVEL:
161 ft. below land surface. Date 11-3-00
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 36

From	To	Estimated Flow Rate	SWL
36	91	20	36
315	423	500	315
548	570	500	127
751	802	500	127

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
silt	0	134	
consolidated gravels	134	154	
Tan clay	14	91	36
consolidated gravels	91	95	
Black Basalt	95	114	
Blue clay	114	158	
Black Basalt	158	335	
Grey Basalt	335	385	
Black silty clay	288	315	
Blue sandstone	315	423	315
Brown clay	423	461	
Black Basalt	461	548	
visicular Basalt	548	570	161
Grey Basalt	570	591	
fractured with clay	591	604	
Grey Basalt	604	751	
visicular Basalt	751	802	
Grey Basalt	802	815	

Date started 9-12-00 Completed 11-3-00
(unbonded) Water Well Constructor Certification:

I certify that the work I performed on the construction, 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.

Signed _____ WWC Number _____ Date _____

(bonded) Water Well Constructor Certification:

I accept responsibility for the construction, 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.

Signed E. Brown WWC Number 759 Date 11-7-00