

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765)

RECEIVED
OCT 26 2005

WELL I.D. # L 80299
START CARD # 17841

Instructions for completing this report are on the last page of this form.

(1) LAND OWNER
Name Paul & Greenup
Address PO Box 311
City Lexington State OR Zip 97339

WATER RESOURCES DEPT
WATER DIVISION
STATE OF OREGON

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

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

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

(5) BORE HOLE CONSTRUCTION Special Construction: Yes No
Depth of Completed Well 252 ft
Explosives used: Yes No Type _____ Amount _____

BORE HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or Pounds
12"	0	36	Bentonite	0	36	90 sacks
8"	36	250				

How was seal placed: Method A B C D E
 Other Poured 1/2 chips
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER

Casing/Liner	Diameter	From	To	Gauge	Material			
					Steel	Plastic	Welded	Threaded
Casing	8"	12	36	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS

Perforations Method _____
 Screens Type _____ Material _____

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
150+		250	1 hr

Temperature of water 60° 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 Odor Colored Other _____
Depth of strata: _____

(9) LOCATION OF WELL (legal description)
County Marion
Tax Lot 5700 Lot _____
Township 15 N or S Range 25 E E or W WM
Section 33 NE 1/4 SW 1/4

Lat _____ or _____ (degrees or decimal)
Long _____ or _____ (degrees or decimal)

Street Address of Well (or nearest address) NEARBY ADDRESS
6700A Charles Canyon Rd Lexington OR

(10) STATIC WATER LEVEL
_____ ft. below land surface. Date _____
10' ft. below land surface. Date 10-22-05
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES
Depth at which water was first found 75'

From	To	Estimated Flow Rate	SWL'
75	90	20	70'
107	115	15	
170	188	20	
220	250	150+	

(12) WELL LOG

Soil Material	From	To	SWL
Cemented Gravel	0	10	
Black Basalt	10	18	
Brown Bst/Tan claystone	18	75	70'
Brown Basalt	75	90	
Black Basalt	90	100	
Black Basalt	100	107	
Broken Bst/Tan clay	107	115	70'
Black Basalt	115	155	
Blk Basalt/blk clay	155	170	
Brown Bst/Tan clay	170	188	70'
Black Basalt	188	220	
Brown Basalt	220	222	
Black	222	228	
Brown/Tan claystone	228	250	70'

Date Started 10-22-05 Completed 10-22-05

(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.

WWC Number 1785 Date 10-24-05
Signed CR

(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.

WWC Number 544 Date 10-24-05
Signed Fony Bund