

STATE OF OREGON
WATER SUPPLY WELL REPORT

02-18-2010

WELL LABEL # L 101703

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

START CARD # 1009409

(1) LAND OWNER Owner Well I.D. _____

First Name _____ Last Name _____
Company OREGON INFO. COUNSEL
Address 229 MADRONA ST.
City SALEM State OR Zip 97301

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

(3) DRILL METHOD

[X] Rotary Air [] Rotary Mud [] Cable [] Auger [] Cable Mud
[] Reverse Rotary [] Other _____

(4) PROPOSED USE [] Domestic [] Irrigation [X] Community

[] Industrial/ Commercial [] Livestock [] Dewatering
[] Thermal [] Injection [] Other _____

(5) BORE HOLE CONSTRUCTION Special Standard [] (Attach copy)

Depth of Completed Well 166.00 ft.

Table with columns: Dia, From, To, Material, SEAL, From, To, Amt, sacks/lbs. Rows include Bentonite and Cement.

How was seal placed: Method [] A [X] B [] C [] D [] E

[X] Other poured bentonite

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

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

Explosives used: [] Yes Type _____ Amount _____

(6) CASING/LINER

Table with columns: Casing, Liner, Dia, From, To, Gauge, Stl, Plstc, Wld, Thrd. Includes rows for 8" and 4.5" diameters.

Shoe [] Inside [] Outside [] Other Location of shoe(s) _____

Temp casing [] Yes Dia _____ From _____ To _____

(7) PERFORATIONS/SCREENS

Perforations Method skill saw
Screens Type _____ Material _____

Table with columns: Perf/S creen, Casing/ Screen, Liner, Dia, From, To, Scrn/slot width, Slot length, # of slots, Tele/ pipe size. Includes rows for 4.5" diameter screens.

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

[] Pump [] Bailer [X] Air [] Flowing Artesian

Table with columns: Yield gal/min, Drawdown, Drill stem/Pump depth, Duration (hr). Row 1: 30, 166, 1.

Temperature 56 °F Lab analysis [] Yes By _____

Table with columns: From, To, Description, Amount, Units. Includes row for water quality concerns.

(9) LOCATION OF WELL (legal description)

County Morrow Twp 4.00 N N/S Range 24.00 E E/W WM
Sec 13 SW 1/4 of the NW 1/4 Tax Lot 300
Tax Map Number _____ Lot _____
Lat _____ " or _____ DMS or DD
Long _____ " or _____ DMS or DD
[] Street address of well [] Nearest address

MILE MARKER 161 I84 EAST

(10) STATIC WATER LEVEL

Table with columns: Date, SWL(psi), SWL(ft). Rows for Existing Well / Predeepening and Completed Well (02-17-2010, 18).

Flowing Artesian? [] Dry Hole? []

WATER BEARING ZONES Depth water was first found 59

Table with columns: SWL Date, From, To, Est Flow, SWL(psi), SWL(ft). Rows for 02-17-2010 at 59 and 141.

(11) WELL LOG

Table with columns: Material, From, To, Ground Elevation. Lists geological layers like silt, broken basalt, black basalt, etc.

Date Started 02-11-2010 Completed 02-17-2010

(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 _____ Date _____
Electronically Filed
Signed _____

(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 1766 Date 02-18-2010
Electronically Filed
Signed BRANDON C. BROWN (E-filed)
Contact Info (optional)

MORR 51844

MORR 51844

02-18-2010

Amended
EAB 1-13-11

Page 1 of 1

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(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 166.00 ft.

BORE HOLE

Dia	From	To	Material	SEAL	From	To	Amt	sacks/ lbs
12	0	39	Bentonite	0	18	16	16	S
8	39	166	Cement	30	39	8	8	S

How was seal placed: Method A B C D E

Other poured bentonite

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

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

Explosives used: Yes Type _____ Amount _____

(6) CASING/LINER

Casing	Liner	Dia	From	To	Gauge	Stl	Plsto	Wld	Thrd
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	8	1	39	.250	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	4.5	6	166	sch80	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Shoe Inside Outside Other Location of shoe(s) _____

Temp casing Yes Dia _____ From _____ To _____

(7) PERFORATIONS/SCREENS

Perforations Method skill saw

Screens Type _____ Material _____

Perf/S	Casing/Screen	Liner	Dia	From	To	Sern/slot	Slot	# of	Tele/
Perf	Liner	Dia	From	To	width	length	slots	pipe	size
		4.5	56	66	.25	6	30		
		4.5	146	166	.25	6	60		

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

Pump Bailer Air Flowing Artesian

Yield gal/min _____ Drawdown _____ Drill stem/Pump depth _____ Duration (hr) _____

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
30		166	1

Temperature 56 °F Lab analysis Yes By _____

Water quality concerns? Yes (describe below)

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)
County Morrow Twp 4.00 N N/S Range 24.00 E E/W WM
Sec 13 SW 1/4 of the NW 1/4 Tax Lot 300
Tax Map Number _____ Lot _____
Lat _____ " or _____ DMS or DD
Long _____ " or _____ DMS or DD
 Street address of well Nearest address
MILE MARKER 161 184 EAST

(10) STATIC WATER LEVEL
Date _____ SWL(psi) + SWL(ft)
Existing Well / Predeepening _____
Completed Well 02-17-2010 _____ 18
Flowing Artesian? Dry Hole?

WATER BEARING ZONES Depth water was first found 59

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
02-17-2010	59	64	10		18
02-17-2010	141	155	20		18

(11) WELL LOG Ground Elevation _____

Material	From	To
silt	0	2
broken basalt	2	35
black basalt	35	59
soft brown basalt	59	64
black basalt	64	80
grey clay	80	92
blue clay	92	137
med black basalt	137	141
viscular basalt	141	150
fractured basalt & blue clay	150	155
black basalt	155	166

RECEIVED
APR 07 2010
WATER RESOURCES DEPT
SALEM, OREGON
RECEIVED
FEB 10 2011
WATER RESOURCES DEPT
SALEM, OREGON
Date Started 02-11-2010 Completed 02-17-2010

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Electronically Filed
Signed _____

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Contact Info (optional) _____

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