MULT 105704

STATE OF OREGON WATER SUPPLY WELL REPORT (as required by ORS 537.765 & OAR 690-205-0210)

	105 104
WELL LABEL # L	105347
START CARD#	1012673

(1) LAND OWNER Owner Well I.D.	(9) LOCATION OF WELL (legal description)
First Name WILLIS Last Name GILL	County MULTNOM Twp I N N/S Range 2 E E/W W
Company	Sec 23 NW 1/4 of the SE 1/4 Tax Lot 100
Address 1940 SYLVAN WAY	Tax Map Number Lot
City WEST LINN State OR Zip 97068	Lat or DMS or DD
(2) TYPE OF WORK X New Well Deepening Conversion	Long or DMS or DD
Alteration (repair/recondition) Abandonment	Street address of well Nearest address
	12423 WHITAKER WAY PORTLAND OREGON
(3) DRILL METHOD Rotary Air Rotary Mud Cable Auger Cable Mud	(10) STATIC WATER LEVEL Date SWL(psi) + SWL(ft)
Reverse Rotary Other	
(4) PROPOSED USE Domestic Irrigation Community	Existing Well / Predeepening
Industrial/Commercial Livestock Dewatering	Completed Well 03-28-2011 12 12 Flowing Artesian? Dry Hole?
Thermal Injection Other	_ Land - Land
(D DODD HOLE CONCERNACE ON	WATER BEARING ZONES Depth water was first found
Depth of Completed Well 120 ft. Special Standard Attach copy	SWL Date From To Est Flow SWL(psi) + SWL(ft)
BORE HOLE SEAL sacks/	312211 12 30 12 12
Dia From To Material From To Amt lbs	
10 0 18 Bentonite 0 18 10 S	
6 18 120	
	(11) WELL LOG Ground Flevetion
	Ground Elevation
How was seal placed: Method A B C D E	Material From To
Other POUR	BROWN SILTY CLAY 0 15
Backfill placed from ft. to ft. Material	GREY SILTY CLAY 15 30 GREY SILTY CLAY AND GRAVEL 30 50
Filter pack from ft. to ft. Material Size	GREY SILTY CLAY AND GRAVEL 30 50
Explosives used: Yes Type Amount	GREEN SANDY GRAVEL 60 70
(6) CASING/LINER	BROWN SANDY GRAVEL 70 80
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd	GREY FINE SAND 80 90
	GREEN SAND AND GRAVEL 90 105
	MULTI COLORED GRAVEL 105 115
	SAND GREY 115 120
	BECEWED
	DECEIVED DECEIVED
Shoe X Inside Outside Other Location of shoe(s) 120	TEVELVE TO THE TENT OF THE TEN
Temp casing X Yes Dia 10 From 0 To 18	APR 2 2 ZUII
(7) PERFORATIONS/SCREENS	JUN 1 5 2011
Perforations Method	WATER RESOURCES DEPT
Screens Type Material	SALEM, OREGON WATER RESOURCES DE
	SALEM OREGON
Perf/S Casing/Screen Scrn/slot Slot # of Tele/ creen Liner Dia From To width length slots pipe size	Date Started 03-21-2011 Completed 03-28-2011
	(unbonded) Water Well Constructor Certification
 	I certify that the work I performed on the construction, deepening, alteration, o 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.
(8) WELL TESTS: Minimum testing time is 1 hour	License Number Date
Pump Bailer Air Flowing Artesian	Password : (if filing electronically)
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	Signed
50 120 1	(bonded) Water Well Constructor Certification
	l accept responsibility for the construction, deepening, alteration, or abandonme
	work performed on this well during the construction dates reported above. All wo
Temperature 53 °F Lab analysis Yes By	performed during this time is in compliance with Oregon water supply we
Water quality concerns? Yes (describe below)	construction standards. This report is true to the best of my knowledge and belief.
From To Description Amount Units	License Number 1480 Date 04-19-2011
	Password : (if filing electronically) *******
	Signed DMA
	Contact Info (optional)
ORIGINAL - WATER RESOURCES D	
THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTM	MENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version: 0.95

MULT 105704

STATE OF OREGON WATER SUPPLY WELL REPORT (as required by ORS 537.765 & OAR 690-205-0210)

WELL LABEL # L 105347		
START CARD#	1012673	

	START CARD# 10126/3		
(1) LAND OWNER Owner Well I.D.	(9) LOCATION OF WELL (legal description)		
First Name WILLIS Last Name GILL	County MULTNON Twp 1 N N/S Range 2 E E/W WM		
Company	Sec 23 NW 1/4 of the SE 1/4 Tax Lot 100		
Address 1940 SYLVAN WAY	Tax Map Number Lot		
City WEST LINN State OR Zip 97068	Lat O O DMS or DD		
(2) TYPE OF WORK New Well Deepening Conversion	Long or DMS or DD		
Alteration (repair/recondition) Abandonment	Street address of well		
(3) DRILL METHOD	12423 WHITAKER WAY PORTLAND OREGON		
Rotary Air Rotary Mud Cable Auger Cable Mud Reverse Rotary Other	(10) STATIC WATER LEVEL Date SWL(psi) + SWL(ft)		
(4) PROPOSED USE Domestic Irrigation Community	Existing Well / Predeepening		
Industrial / Commercial Livestock Dewatering	Completed Well 03-28-2011 12		
Thermal Injection Other	Flowing Artesian? Dry Hole?		
(5) BORE HOLE CONSTRUCTION Special Standard Attach copy	WATER BEARING ZONES Depth water was first found		
Depth of Completed Well 120 ft.	SWL Date From To Est Flow SWL(psi) + SWL(ft)		
BORE HOLE SEAL sacks/	12 120 30 12		
Dia From To Material From To Amt lbs			
10 0 18 Bentonite 0 18 10 S			
6 18 120			
	(11) WELL LOG Ground Elevation		
How was seal placed: Method A B C D E	Material From To		
XOther POUR	BROWN SILTY CLAY 0 15		
Backfill placed from ft. to ft. Material	GREY SILTY CLAY 15 30		
Filter pack from ft. to ft. Material Size	GREY SILTY CLAY AND GRAVEL 30 50		
Explosives used: Yes Type Amount	GREY SILTY GRAVEL		
(6) CASING/LINER	BROWN SANDY GRAVEL 70 80		
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd	GREY FINE SAND 80 90		
	GREEN SAND AND GRAVEL 90 105		
	MULTI COLORED GRAVEL 105 115		
	SAND GREY 115 120		
	RECEIVED		
	TIEVEIVAD		
Shoe X Inside Outside Other Location of shoe(s) 120	APR 2 2 2011		
Temp casing X Yes Dia 10 From 0 To 18	AIN B B COII		
(7) PERFORATIONS/SCREENS	WATER RESOURCES DEPT		
Perforations Method Material	SALEM, OREGON		
Perf/S Casing/Screen Scrn/slot Slot # of Tele/ creen Liner Dia From To width length slots pipe size	Date Started 03-21-2011 Completed 03-28-2011		
	(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.		
(8) WELL TESTS: Minimum testing time is 1 hour	License Number Date		
Pump Bailer • Air Flowing Artesian	Password : (if filing electronically) Signed		
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)			
50 120 1	(bonded) Water Well Constructor Certification		
	I accept responsibility for the construction, deepening, alteration, or abandonmen		
Temperature 53 °F Lab analysis Yes By	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		
Water quality concerns? Yes (describe below)	construction standards. This report is true to the best of my knowledge and belief.		
From To Description Amount Units	License Number 1480 Date 04-19-2011		
	Password: (if filing electronically) ******		
	Signed 2/11/2		
Contact Info (optional)			
ORIGINAL - WATER RESOURCES DEPARTM THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTM			

MULT 105704

WANTER RESOURCES DEPT SALEM, METARS

nos 22 aga

BECEINED

