					Page 1 of 1
STATE OF OREGON	MULT	134809	WELL I.D. LABEL# I		
WATER SUPPLY WELL REPORT (as required by ORS 537.765 & OAR 690-205-0210)	7/2/2	0020	START CARD # ORIGINAL LOG #	1047776	
	11414		UNIGINAL LUG #		
(1) LAND OWNER Owner Well I.D. First Name LEO Last Name STODDARD	•		ION OF WELL (legal d	accorintian)	
Company					
Address 52644 NE 1ST ST			$\frac{\text{OMAH}}{\text{SE}} \frac{\text{Twp } 3.00}{1/4 \text{ of the } \text{SE}} \text{N/}$		
City SCAPPOOSE State OR Zip 97056 2) TYPE OF WORK X New Well Deepening Cord					
2) TYPE OF WORK	onversion	Lat	er" or <u>45.69323702</u> " or <u>-122.870257</u>	2 200	DMS or DD
Alteration (complete 2a & 10) Abandonment 2a) PRE-ALTERATION	(complete 5a)	Long °	" or -122.870257	63	DMS or DD
Dia + From To Gauge Stl Plstc Wld Thro		Str	eet address of well ONe	arest address	_
Casing:		23500 NW ST.	HELENS RD PORTLAND, OF	2 97231	
Material From To Amt sacks/lbs					
(3) DRILL METHOD		(10) STATIO	C WATER LEVEL		
Rotary Air Rotary Mud Cable Auger Cable Mu	ıd		Date	SWL(psi) +	SWL(ft)
Reverse Rotary Other			ell / Pre-Alteration		
		Completed	Well 6/30/2020 Flowing Artesian?	Dry Hole?	6
(4) PROPOSED USE Domestic Irrigation Commun	-		-		150.00
Thermal Injection Other		WATER BEARI	1	ter was first found	
		SWL Date	From To Est	Flow SWL(psi)	+ SwL(ft)
(5) BORE HOLE CONSTRUCTION Special Standard Depth of Completed Well 180.00 ft.	(Attach copy)	6/30/2020	150 180	60	X 6
BORE HOLE SEAL	sacks/				
Dia From To Material From To	Amt lbs				
12 0 20 Bentonite 0 20	15 S				
10 20 109 Calculated 7.5 109 180 Cement 20 109	11.34 20 S	L			
Calculated		(11) WELL I	LOG Ground Elevation	n	
How was seal placed: Method A A B C D			Material	From	То
Conter POURED & PRODDED		BROWN CLAY		0	8
Backfill placed from ft. to ft. Material			ILTY CLAY - SILTS	8	37
Filter pack from ft. to ft. MaterialSiz		BROWN SILTS GRAY SILTS V		37	45 90
Explosives used: Yes Type Amount		BROWN CEMENTED SANDS		90	95
(5a) ABANDONMENT USING UNHYDRATED BENTON	NITE	GRAY/GRAY	BLACK BASALT	95	101
Proposed Amount Actual Amount		GRAY/GRAY	BLACK BASALT	101	180
(6) CASING/LINER					
$\begin{array}{ c c c c c c c c c c c c c c c c c c c$	tc Wld Thrd				
$ \begin{array}{c c c c c c c c c c c c c c c c c c c $	신				
Shoe Inside Outside Other Location of shoe(s)	109				
Temp casing Yes Dia From + To					
7) PERFORATIONS/SCREENS					
Perforations Method Screens Type Slotted Material PVC-20	00	Date Started	5/22/2020 Com	pleted 6/30/2020	
Perf/ Casing/ Screen Scrn/slot Slot #					
	ots pipe size	````	ater Well Constructor Certifi		1
Screen Liner 6 140 170 .02 Screen Liner 6 170 180 .06	0.02		he work I performed on the co of this well is in compliance		
	0.00		indards. Materials used and in		
		the best of my k	knowledge and belief.		
		License Numbe	er <u>1492</u> Da	ate <u>7/1/2020</u>	
8) WELL TESTS: Minimum testing time is 1 hour		Signed MEI			
Pump Bailer O Air Flowing	g Artesian	MEL MEL	VIN BIGSBY (E-filed)		
Yield gal/min Drawdown Drill stem/Pump depth Duration		· /	r Well Constructor Certificat		
60 100 1			sibility for the construction, de		
	——————————————————————————————————————		l on this well during the constru ng this time is in complianc		
Temperature 56 °F Lab analysis Yes By			ndards. This report is true to th		
	; ppm	License Numbe	r 2023 Da	ate 7/1/2020	
Water quality concerns? Yes (describe below) TDS amount 175 From To Description Amount	nt Units				
	_ <u></u>		HAEL APPLEBEE (E-filed)		
	<u> </u>	Contact Info (or	ptional) Mike Applebee 503-64	7-2969	

ORIGINAL - WATER RESOURCES DEPARTMENT THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version: