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

4933 mg.

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(START CARD) # 79235

Instructions for completing this report are on the last page of this form. (9) LOCATION OF WELL by legal description: Well Number MT. CALVARY CEMETARY County Mult. Latitude_____ Longitude___ Name Township 1N N or S Range 333 SW SKYLINE BLVD. 1E E or W. WM. Address Zip 97221 SW SE 1/4____ PORTLAND Section 31 State Block Tax Lot Lot Subdivision (2) TYPE OF WORK New Well Deepening Alteration (repair/recondition) Abandonment Street Address of Well (or nearest address) 333 SW Skyline Blvd. Portland, OR (3) DRILL METHOD: (10) STATIC WATER LEVEL: Rotary Air Rotary Mud Cable Auger 455 ft. below land surface. Date 8-10-95 Other (4) PROPOSED USE: 1b. per square inch. Artesian pressure (11) WATER BEARING ZONES: Industrial Community XIrrigation Domestic Injection Livestock Other Thermal (5) BORE HOLE CONSTRUCTION: Depth at which water was first found ____ Special Construction approval Yes No Depth of Completed Well 625 ft. Estimated Flow Rate SWL From To Explosives used Yes X No Type 635 250+ gpm 455 543 **SEAL** HOLE Material From Sacks or pounds Diameter From 0 11 sacks 0 481 8 mesh 143/460 33 sacks cement 60 435 drillgel .10" 481 25 sacks 435 481 625 cement (12) WELL LOG: ΧC $\mathbf{X}\mathbf{D}$ Method A B How was seal placed: Ground Elevation _ N Other poured into dry annular SWL Material Backfill placed from ft. to ft. Material Asphalt/fill Size of gravel 0 Gravel placed from ft. to <u>Dark brown clay</u> 7 (6) CASING/LINER: 7 29 Sticky lt. brown clay Threaded Welded To Gauge Steel Plastic 29 39 Sticky gray clay 481L250 X \mathbf{x} Casing: 10" 39 49 \Box Sticky lt. gray-brown clay 49 71 П Decomp brown basalt 152 Firm gray-brown basalt 71 101 110 Broken w/clay 625, 250 |X|465 Liner: 152 169 Soft brown basalt 169 230 Firm gray-brown basalt Final location of shoe(s) 230 266 (7) PERFORATIONS/SCREENS: Soft red-brown basalt Firm gray-brown basalt 266 347 Method Torch X Perforations Soft brown basalt occ. broken 347 397 Material Stee1 Screens Type Slot Tele/pipe & decomp streaks Casing Liner Number , Diameter size 397 Broken grav-brown basalt. 3/4x12 120pipe П \mathbf{X} 625 585 428 П loss circ./caving \Box Decomp brown basalt(loss circ) 428 456 456 537 П Firm gray-brown basalt 537 543 Soft brown basalt 543 Firm gray-brown basalt w/ Completed Date started 6-14-95 (8) WELLTESTS: Minimum testing time is 1 hour (unbonded) Water Well Constructor Certification: Flowing I certify that the work I performed on the construction, alteration, or abandonment K Air Artesian Bailer Pump 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 Drill stem at Time Yield gal/min 550 1 hr. and belief. 180 WWC Number 600 230 (bonded) Water Well Constructor Certification: Depth Artesian Flow Found Temperature of water I accept responsibility for the construction, alteration, or abandonment work Yes By whom Was a water analysis done? performed on this well during the construction dates reported above. All work Did any strata contain water not suitable for intended use? 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. Salty Muddy Odor Colored Other WWC Number 1266 Depth of strata: Date 8-15-95 Signed

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(START CARD) # 79235

(1) OWNER: Well Number	
Name MT. CALVARY CEMETARY	County Mult. Latitude Longitude
Address 333 SW SKYLINE BLVD.	Township 1N N or S Range 1E E or W. WM.
City PORTLAND State OR Zip 972	
(2) TYPE OF WORK	Tax Lot Block Subdivision
New Well Deepening Alteration (repair/recondition) Abandonn	
(3) DRILL METHOD:	Portland, OR
Rotary Air Rotary Mud Cable Auger	(10) STATIC WATER LEVEL:
Other	ft. below land surface. Date
(4) PROPOSED USE:	Artesian pressure lb. per square inch. Date
Domestic Community Industrial XIrrigation	(11) WATER BEARING ZONES:
Thermal Injection Livestock Other	
(5) BORE HOLE CONSTRUCTION:	Depth at which water was first found
Special Construction approval Yes XNo Depth of Completed Well 62.	
Explosives used Yes No Type Amount	
HOLE SEAL	20 Edinated Now Nate 5412
Diameter From To Material From To Sacks or pounds	
	'
	(12) WELL LOG:
How was seal placed: Method A B C D	Ground Elevation
Other	
Backfill placed from ft. to ft. Material	Material From To SWL
Gravel placed from ft. to ft. Size of gravel	visicular streaks 590
(6) CASING/LINER:	Soft gray-brown basalt 590 635
Diameter From To Gauge Steel Plastic Welded Thre	aded 10" Fill in bottom
Casing:	- 1
Liner:	<u> </u>
Final location of shoe(s)	
7) PERFORATIONS/SCREENS:	-
Perforations Method	
Screens Type Material Tele/pipe	
From To size Number Diameter size Casing I	Liner
	— [
(8) WELL TESTS: Minimum testing time is 1 hour	Date started 6-14-95 Completed 8-10-95
Flanina	(unbonded) Water Well Constructor Certification:
Flowing Pump Bailer Air Artesian	I certify that the work I performed on the construction, alteration, or abandonment
Yield gal/min Drawdown Drill stem at Time	of this well is in compliance with Oregon water supply well construction standards.
1 hr.	Materials used and information reported above are true to the best of my knowledge and belief.
T III.	
	WWC Number
	Signed Date Date
Temperature of water Depth Artesian Flow Found	
Was a water analysis done? Yes By whom	I accept responsibility for the construction, alteration, or abandonment work
Did any strata contain water not suitable for intended use? Too little	performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well
Salty Muddy Odor Colored Other	construction standards. This report is true to the best of my knowledge and belief.
Depth of strata:	WWC Number <u>1266</u>
	Signed Date <u>8-15-95</u>