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

WELL LABEL # L	78324	
START CARD#	184434	

(1) LAND OWNER Owner Well I.D.	(9) LOCATION OF WELL (legal description)		
First Name Last Name	County MULTNOMA Twp 1 N N/S Range 1 E E/W	/WM	
Company Heritage Building LLC	Sec 23 SW 1/4 of the SW 1/4 Tax Lot 8900		
Address 1628 N Columbia Blvd	Tax Map Number Lot		
City Portland State OR Zip 97217	Lat "or DMS or Long" or DMS or		
(2) TYPE OF WORK New Well Deepening Conversion	Long or DMS or	DD	
Alteration (repair/recondition) Abandonment	Street address of well	\neg	
(3) DRILL METHOD	3934 NE Martin Luther King Blvd Portland		
Rotary Air Rotary Mud Cable Auger Cable Mud Reverse Rotary Other	(10) STATIC WATER LEVEL Date SWL(psi) + SWL(ft)		
	Existing Well / Predeepening		
(4) PROPOSED USE Domestic Irrigation Community	Completed Well 10/07/06 166		
Industrial/ Commercial Livestock Dewatering	Flowing Artesian? Dry Hole?		
▼ Thermal ▼ Injection Other	WATER BEARING ZONES Depth water was first		
(5) BORE HOLE CONSTRUCTION Special Standard Attach copy		<u></u>	
Depth of Completed Well 160 ft. BORE HOLE SEAL sacks.	9/26/06 196 216 60 166 9/26/06 216 236 25 166	\dashv	
BORE HOLE SEAL sacks. Dia From To Material From To Amt Ibs	9/26/06 236 256 80 166	\neg	
12 0 36 Bentonite Chips 0 36 28 S			
8 +2 260			
	(11) WELL LOG Ground Elevation	_	
How was seal placed: Method A B C D E	Material From To		
Other Poured Chips	Grey Gravel 0 1		
Backfill placed fromft. toft. Material	Tan sandy silt 1 28	_	
Filter pack fromft. toft. MaterialSize	Brown sand with small gravel 28 45 Brown med-coarse sand with small gravel 45 72	\dashv	
Explosives used: Yes Type Amount	Brown gravelly sand med-coarse 72 124	_	
(B) CASING/I INFD	Brown sand medium 124 140		
(6) CASING/LINER Casing Liner Dia + From To Gauge Stl Pistc Wid Thrd	Brown gravelly sand med some silt 140 186		
●	Brown gravels with sand matrix 186 190	_	
	Grey gravels with sand matrix 190 260	\dashv	
Shoe Inside Other Location of shoe(s) 266			
Temp casing Yes Dia From To		\exists	
(7) PERFORATIONS/SCREENS		\dashv	
Perforations Method		\dashv	
Screens Type Material		\exists	
Perf/ Casing Screen Scrn/slot Slot # of Tele/ Scree /Liner Dia From To width lengt slots pipe	Date Started 9/29/06 Completed 10/07/06		
h cira	(unbonded) Water Well Constructor Certification		
Screen 8" 190 260 .010 Tele	I certify that the work I performed on the construction, deepening, alteration		
	abandonment of this well is in compliance with Oregon water supply construction standards. Materials used and information reported above are		
	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) 110 258 5.5			
2,30 3,3	(bonded) Water Well Constructor Certification I accept responsibility for the construction, deepening, alteratio	n, or	
RECEIVED	abandonment work performed on this well during the construction	dates	
Temperature 56 *F Lab analysis Yes By	reported above. All work performed during this time is in compliance		
Water quality concerns? Yes (describe below)	 Oregon water supply well construction standards. This report is true to th of my knowledge and belief. 	ie dest	
From To Description FEB 1 5m2007Units	License Number 1824 Date 10/28/06		
	Password : (if filing electronically)	_	
WATER RESOURCES DEPT	Signed Contact Info		
SALEM, OREGON	Contact into		

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT

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