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

WELL LABEL # L	100325
START CARD#	201825

(1) LAND OWNER Owner Well I.D.	(9) LOCATION OF WELL (legal description)
	County MULTNOM, Twp I N N/S Range! E E/W WM
First Name Last Name Company Portland Meadows	Sec 10 NW 1/4 of the NE 1/4 Tax Lot 200
Address 1001 North Schmeer Rd.	Tax Map Number Lot
City Portland State OR Zip 97217	Lat ° ' " or DMS or DD
(2) TYPE OF WORK New Well Deepening Conversion	Long or DMS or DD
Alteration (repair/recondition) Abandonment	Street address of well Nearest address
	1001 North Schmeer Rd., Portland, OR
(3) DRILL METHOD 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
Thermal Injection Other	Flowing Artesian? Dry Hole?
	WATER BEARING ZONES Depth water was first found
(5) BORE HOLE CONSTRUCTION Special Standard Attach copy)	SWL Date From To Est Flow SWL(psi) + SWL(ft)
Depth of Completed Well ft. BORE HOLE SEAL sacks/	
Dia From To Material From To Amt lbs	
18 0 24 Cement 0 24 14 S	
	(11) WELL LOG Ground Elevation
How was seal placed: Method A B C D E	Ground Elevation
	Material From To
Other ft. to ft. Material	Overdrilled 14 inch (10") with 18 inch overdrill to
Filter pack from ft. to ft. Material Size	meet requirements on seal. 0 24
Explosives used: Yes Type Amount	
	Cement grout (14 sks. mix) 24 2
(6) CASING/LINER Casing Liner Dia + From To Pauge Sti Piste Wid Thrd	
Casing Liner Dia + Floin 10 gauge Su Fisic Wid Hild	
	RECEIVED
Shoe Inside Outside Other Location of shoe(s)	AUC O F OCC
Temp casing Yes Dia From To	AUG 0 5 2009
(7) PERFORATIONS/SCREENS	WATER DECOURS
Perforations Method	WATER RESOURCES DEPT
Screens Type Material	SALEM, OREGON
Perf/ Casing/ Screen Scrn/slot Slot # of Tele/	Date Started 08-01-2009 Completed 08-01-2009
Screen Liner Dia From To width length slots pipe size	Date Started 08-01-2009 Completed 08-01-2009
	(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)
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	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
Temperature °F Lab analysis Yes By	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.
Water quality concerns? Yes (describe below) From To Pescription Amount Units	
From To Description Amount Units	License Number 573 Date 08-03-2009 Password (if files electronically)
	Signed Si
	Contact Info (optional)