

STATE OF OREGON  
WATER SUPPLY WELL REPORT

WELL I.D. # L 68852  
START CARD # 161380

Instructions for completing this report are on the last page of this form.

(1) LAND OWNER Well Number WELL #3  
Name CITY OF INDEPENDENCE  
Address 240 MONMOUTH ST.  
City INDEPENDENCE State OR. Zip 97351

(2) TYPE OF WORK  
 New Well  Deepening  Alteration (repair/recondition)  Abandonment

(3) DRILL METHOD:  
 Rotary Air  Rotary Mud  Cable  Auger  
 Other

(4) PROPOSED USE:  
 Domestic  Community  Industrial  Irrigation  
 Thermal  Injection  Livestock  Other Municipal

(5) BORE HOLE CONSTRUCTION:  
Special Construction approval  Yes  No Depth of Completed Well 52 ft.  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE		SEAL		Sacks or pounds	
Diameter	From To	Material	From To		
16"	0' 52'	CEMENT	0' 20'	21	SACKS

How was seal placed: Method  A  B  C  D  E  
 Other

Backfill placed from 42 ft. to 52 ft. Material 3/8 PEA GRAN.  
Gravel placed from 20 ft. to 22 ft. Size of gravel PEA GRAN.

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
12"	0'	22'	.250"	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
12"	42'	52'	.250"	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Liner: \_\_\_\_\_

Drive Shoe used  Inside  Outside  None  
Final location of shoe(s) \_\_\_\_\_

(7) PERFORATIONS/SCREENS:

Perforations Method \_\_\_\_\_  
 Screens Type V-SLOT Material 304 SS

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
22'	32'	100		12"	PS	<input type="checkbox"/>	<input type="checkbox"/>
32'	42'	60		12"	PS	<input type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour

Pump  Bailer  Air  Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
900	10.5'		5 hrs
810	9.83'		3

Temperature of water 56° Depth Artesian Flow Found \_\_\_\_\_  
Was a water analysis done?  Yes By whom WATERLAB  
Did any strata contain water not suitable for intended use?  Yes  No  
 Salty  Muddy  Odor  Colored  Other \_\_\_\_\_  
Depth of strata \_\_\_\_\_

(9) LOCATION OF WELL by legal description:  
County POLK Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 8S N or S Range 4W E or W. WM.  
Section 21 NW 1/4 SE 1/4  
Tax Lot 100 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_

Street Address of Well (or nearest address) IN WELL FIELD east of JUNCTION OF POLK ST & S. RIVER DR. 200' S. OF #2 WELL

(10) STATIC WATER LEVEL:  
14'-8" ft. below land surface. Date 02-15-06  
Artesian pressure \_\_\_\_\_ lb. per square inch Date \_\_\_\_\_

(11) WATER BEARING ZONES:  
Depth at which water was first found 19'

From	To	Estimated Flow Rate	SWL
22'	42'	800+ GPM	14.67'

(12) WELL LOG:  
Ground Elevation \_\_\_\_\_

Material	From	To	SWL
Brown clay	0'	7'	
Brown sandy clay	7'	19'	
Gravel, small med w/some coarse br. sand - W.B.	19'	39'	14.8
Gravel w/ fine sand - brown	39'	41'	14.8
Brown sand w/small gravel	41'	43'	
Small gravel w/black sand and wood	43'	44'	
Black <del>fine</del> medium coarse sand w/small gravel + wood	44'	50'	
Blue clay w/gravel	50'	52'	

Date started Nov. 23, '05 Completed FEB. 20, 2006

(unbonded) Water Well Constructor Certification:  
I certify that the work I performed on the construction, 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.  
WWC Number \_\_\_\_\_  
Signed \_\_\_\_\_ Date \_\_\_\_\_

(bonded) Water Well Constructor Certification:  
I accept responsibility for the construction, alteration, or abandonment 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 construction standards. This report is true to the best of my knowledge and belief.  
WWC Number 6333  
Signed Michael Waldrop Date FEB. 28, 06

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OVER THE COUNTER