

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

POLK 53003

TAG#L93618

(START CARD) # 196831

(1) OWNER: Well Number _____
 Name 10 INDEPENDENCE
 Address 240 MONMOUTH ST.
 City INDEPENDENCE State OR Zip 97351

(2) TYPE OF WORK:
 New Well Deepen Recondition Abandon

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

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Other W. MUNICIPAL

(5) BORE HOLE CONSTRUCTION:
 Special Construction approval Yes No Depth of Completed Well 45 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Amount
Diameter	From	To	Material	From	To	sacks or pounds
12"	0	45'	CEMENT	22.5'	8 FT.	15 SACKS
			BENTONITE	8 FT	0'	10 SACKS

How was seal placed: Method A B C D E
 Other POURED FROM SURFACE TO SURFACE
 Backfill placed from 24.5 ft. to 22.5 ft. Material 4 MINUS W/BENT
 Gravel placed from 45 ft. to 24.5 ft. Size of gravel 3/8 ROUND

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
8"	12.5'	25'	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8"	38'	45'	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Liner: _____

Final location of shoe(s) NO SHOE USED

(7) PERFORATIONS/SCREENS:
 Perforations Method _____
 Screens Type V-SLOT Material 304SS

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
25'	38'	120		8"	PS	<input type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
 Yield gal/min 250 GPM Drawdown 14'-10" Drill stem at _____ Time 30 hrs

Temperature of Water 54° Depth Artesian Flow Found _____
 Was a water analysis done? Yes By whom WATERLAB
 Did any strata contain water not suitable for intended use? Too little
 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 SW 1/4 SE 1/4
 Tax Lot 100 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) EAST END OF GRAND ST.; 200'± FROM WILLAM. RIVER

(10) STATIC WATER LEVEL:
14 ft. below land surface. Date 06-06-09
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found 25'

From	To	Estimated Flow Rate	SWL
25'	38'	250 GPM	14'

(12) WELL LOG:
 Ground elevation _____

Material	From	To	SWL
CLAY, BROWN	0'	1'	
CLAY, BROWN + SANDY	1'	8'	
CLAY, BROWN W/ BITS OF GRAVEL	8'	22'	
GRAVEL, SMALL TO LARGE W/ BROWN + BLACK SAND	22'	28'	14'
GRAVEL, SMALL TO MEDIUM W/ BLACK FINE TO COARSE SAND	28'	38'	14'
GRAVEL, SAND, SAND RATIO TO GRAVEL INCREASING	38'	40'	
GRAY CLAY, SANDY	40'	42'	
GRAY CLAY, DENSER	42'	45'	

RECEIVED
 OCT 20 2009
 WATER RESOURCES DEPT
 SALEM, OREGON
 Date started 04-16-09 Completed 06-08-09

(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 well construction standards. Materials used and information reported above are true to my best knowledge and belief.
 Signed _____ WWC Number _____ 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 well construction standards. This report is true to the best of my knowledge and belief.
 Signed Michael Waltrip WWC Number 633 Date 06-09-09