

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

POLK 53659

WELL I.D. LABEL# L 117555
START CARD # 1025649
ORIGINAL LOG #

3/9/2015

(1) LAND OWNER

Owner Well I.D.
First Name Last Name
Company RIVER BEND SAND AND GRAVEL COMPANY
Address P.O. BOX 12095
City SALEM State OR Zip 97309

(2) TYPE OF WORK

[X] New Well [] Deepening [] Conversion
[] Alteration (complete 2a & 10) [] Abandonment (complete 5a)

(2a) PRE-ALTERATION

Casing: Dia + From To Gauge Stl Plstc Wld Thrld
Material From To Amt sacks/lbs
Seal:

(3) DRILL METHOD

[X] Rotary Air [] Rotary Mud [] Cable [] Auger [] Cable Mud
[] Reverse Rotary [] Other

(4) PROPOSED USE

[] Domestic [] Irrigation [] Community
[X] Industrial/ Commercial [] Livestock [] Dewatering
[] Thermal [] Injection [] Other

(5) BORE HOLE CONSTRUCTION

Depth of Completed Well 99.00 ft. Special Standard [] (Attach copy)

Table with columns: Dia, From, To, Material, SEAL, Amt, lbs. Row 1: 14, 0, 21, Cement, 0, 21, 12, S. Row 2: 10, 21, 99, Calculated, 12.

How was seal placed: Method [] A [] B [X] C [] D [] E

[X] Other BENTONITE DRY

Backfill placed from ft. to ft. Material

Filter pack from ft. to ft. Material Size

Explosives used: [] Yes Type Amount

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount Actual Amount

(6) CASING/LINER

Table with columns: Casing, Liner, Dia, From, To, Gauge, Stl, Plstc, Wld, Thrld. Row 1: [X], [], 10, 3, 99, .250, [X], [], [], [].

Shoe [X] Inside [] Outside [] Other Location of shoe(s) 99

Temp casing [] Yes Dia From To

(7) PERFORATIONS/SCREENS

Perforations Method Holte perforator

Screens Type Material

Table with columns: Perf/ Screen, Casing/ Screen, Dia, From, To, Scrn/slot width, Slot length, # of slots, Tele/ pipe size. Row 1: Perf, Casing, 10, 87, 97, .2, 1, 400.

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

[] Pump [] Bailer [X] Air [] Flowing Artesian

Table with columns: Yield gal/min, Drawdown, Drill stem/Pump depth, Duration (hr). Row 1: 250, 98, 12.

Temperature 54 °F Lab analysis [] Yes By

Water quality concerns? [] Yes (describe below) TDS amount

Table with columns: From, To, Description, Amount, Units.

(9) LOCATION OF WELL (legal description)

County POLK Twp 7.00 S N/S Range 3.00 W E/W WM
Sec 15 NW 1/4 of the NW 1/4 Tax Lot 2200
Tax Map Number Lot
Lat " or DMS or DD
Long " or DMS or DD

[X] Street address of well [] Nearest address

2470 RIVER BEND ROAD SALEM, OREGON 97304

(10) STATIC WATER LEVEL

Table with columns: Existing Well / Pre-Alteration, Date, SWL(psi), SWL(ft). Row 1: Completed Well, 3/3/2015, 21.

Flowing Artesian? [] Dry Hole? []

WATER BEARING ZONES

Depth water was first found 23.00

Table with columns: SWL Date, From, To, Est Flow, SWL(psi), SWL(ft). Row 1: 3/3/2015, 23, 99, 250, 21.

(11) WELL LOG

Ground Elevation

Table with columns: Material, From, To. Rows: Crushed fill (0-1), Top soil (1-3), Fine brown sand (3-8), Brown clay (8-11), Silty brown sand (11-25), Gray silty gravel tight (25-30), Gray sand and gravel tight (30-34), Reddish-brown sand and gravel semi-tight (34-50), Gray and brown sand and gravel dirty (50-76), Medium to large sand and gravel w/clay (76-85), Dark course sand and gravel semi-tight (85-99).

Date Started 2/23/2015 Completed 3/3/2015

(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.

License Number 1629 Date 3/6/2015

Signed JAMES GUNN (E-filed)

(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 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.

License Number 1273 Date 3/8/2015

Signed FLOYD G SIPPPEL (E-filed)

Contact Info (optional)

