STATE OF OREGON WATER SUPP

(as required by (1) LAND OWNER

(2) TYPE OF WORK

(4) PROPOSED USE

(2a) PRE-ALTERATION Dia + From

Material

Reverse Rotary Other

Industrial/ Commericial

(5) BORE HOLE CONSTRUCTION

To

62

78

86

81

(5a) ABANDONMENT USING UNHYDRATED Pounds

Dia

6

Perforations Method Screens Type milled

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

O Bailer

Drawdown

Salinity

50

Depth of Completed Well 81

Thermal Injection

BORE HOLE

From

0

62

78

How was seal placed:

Backfill placed from _

Filter pack from _

Proposed Amount

(6) CASING/LINER Casing Liner

X Other cement tremied

Explosives used: Yes

۰

Shoe 🗙 Inside

Temp casing X Yes Dia 10

Perf/S Casing/ Screen

Liner

Casing

Yield gal/min

18

Water guality concerns?

Τо

86

Temperature 52

rom

84

creen

O Pump

Perf

(7) PERFORATIONS/SCREENS

Dia

6

Kotary Air Rotary Mud Cable

Company Jack Hempicine L.L.C. Address 7744 N.W. Mint Ave.

First Name

City Albany

Casing

Seal: (3) DRILL METHOD

Dia

10

8

5.5

KEGUN		0-12-10
PLY WELL REPORT		
ORS 537.765 & OAR 690-205-0210)		

Alteration (complete 2a &

Description

°F Lab analysis Yes By_

Drill stem/Pump depth

80

Yes (describe below) TDS amount 310

Outside

POLK 54	245 WELL I.D. LABEL# L 132109			
LL REPORT	START CARD # 1042061			
765 & OAR 690-205-0210)	ORIGINAL LOG #			
<u> </u>	POLK 54245			
Owner Well I.D. <u>NW</u> Last Name	- 3 (5			
2.	(9) LOCATION OF WELL (legal description)			
	County POLK Twp 8 S N/S Range 4 W E/W W			
State Or Zip 97321	Sec <u>7</u> <u>SW</u> 1/4 of the <u>SW</u> 1/4 Tax Lot <u>502</u>			
New Well Deepening Conversion	Tax Map Number Lot Lat'' or DMS or DE			
ation (complete 2a & 10) Abandonment(complete 5a)	Lat OMS or DE			
	Long OMS or DE			
n To Gauge Stl Plstc Wld Thrd				
	3393 S. Pacific Hwy. W Rickreall, Or 97351			
From To Amt sacks/lbs				
	(10) STATIC WATER LEVEL			
	Date SWL(psi) + SWL(ft)			
Mud Cable Auger Cable Mud	Existing Well / Pre-Alteration			
ther	Completed Well 03-01-2019 6			
X Domestic Irrigation Community	Flowing Artesian? Dry Hole?			
Livestock Dewatering	WATER BEARING ZONES Depth water was first found <u>31</u>			
Other	SWL Date From To Est Flow SWL(psi) + SWL(ft)			
FRUCTION Special Standard (Attach copy 11 81 ft.				
	03-01-2019 53 81 18 6			
SEAL sacks/ Material From To Amt Ibs	84 86 5			
Bentonite Chips 0 29 34 S	╢┝───┤──┤──┤┝╅━━━┥			
Calculated 12.08				
Cement 29 50 9 S	(11) WELL LOG Ground Elevation			
	Ground Elevation			
Method A B C D E	Material From To			
	clay, brown 0 15			
ft. to <u></u>	clay, grey, w/gravel1525clay, brown, w/gravel2531			
t. to <u>62</u> ft. Material <u>3/8</u> Size pea gravel	clay, brown, w/gravel2531gravel, brown, black, caving3137			
Type Amount	clay, grey, sandy 37 53			
SING UNHYDRATED BENTONITE	clay, grey, sandy w/ fine pea gravel 84 86			
ounds Actual Amount Pounds				
+ From To Gauge Stl Plstc Wld Thrd				
X 1 80 .250 O X				
	Dickerson Well Drilling, Inc.			
	(503) 623-2664			
	MAR 11 2019			
outside Other Location of shoe(s) 80				
0 From + X 1 To 42				
REENS	OWRD			
Method				
milled Material steel	Date Started <u>02-22-2019</u> Completed <u>03-01-2019</u>			
Scrn/slot Slot # of Tele/				
From To width length slots pipe size	(unbonded) Water Well Constructor Certification			
57 77 .09 3 458	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 t			
	the best of my knowledge and belief.			
	License Number 1574 Date 03-07-2019			
um testing time is 1 hour				
er (Air C Flowing Artesian	Signed Mr SUM			
a (a frithing Artesian				

,	(honded)	Water	W/all	Constructor	Certification
ł	(Donaca)	w aler	wen	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	1571

Signed

Date 03-07-2019 Contact Info (optional)

ORIGINAL - WATER RESOURCES DEPARTMENT

ppm

Units

ppm

Duration (hr)

Amoun

650

4

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version: 0.95