STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.545 & 537.765 and OAR 690-205-0210)

POLK 55040

10/23/2025

WELL I.D. LABEL# L 149425
START CARD # 1079677
ORIGINAL LOG #

(1) LAND OWNER

Owner Well I.D. 4
First Name MARK Last Name WILDFANG
Company
Address P.O BOX 6123
City SALEM State OR Zip 97304

(2) TYPE OF WORK

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

(2a) PRE-ALTERATION

	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
Casing:									

	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

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

(5) BORE HOLE CONSTRUCTION

Special Standard [ ] (Attach copy)
Depth of Completed Well 280.00 ft.

BORE HOLE

Dia	From	To
10	0	180
6	180	280

SEAL

Material	From	To	Amt	sacks/lbs
Bentonite Chips	0	15	7	S
		Calculated	3.81	
Cement	15	180	48	S
		Calculated	11.88	

Seal placement method: [ ] A [ ] B [X] C [ ] D [ ] E [X] Other: FILLED TO THE TOP
Backfill placed from ft. to ft. Material
Filter pack from ft. to ft. Material Size
Explosives used: [ ] Type Amount
Seal Placement Begin Date 10/2/2025 Begin Time 12 00

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount Actual Amount

(6) CASING/LINER

C/L	Dia	+	From	To	Gauge	Mat. Type	Wld	Thrd	Shoe	Shoe Location
C	6	X	1	180	0.250	ST	X		OUT.	180
L	4.5		5	280	SDR21	PL	X			

Temp casing [X] Yes Dia 10 From + [X] 1 To 5

(7) PERFORATIONS/SCREENS

Perforations Method Saw Cut
Screens Type Material

Perf/ Screen	Casing/ Liner	Screen Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ Pipe size
Perf	Liner	4.5	220	280	.125	12	64	

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

Type of Test	Yield (gal/min)	Drawdown	Drill Stem/ Pump Depth	Duration (hr)
Air	20		280	60

Temperature 54 °F Lab analysis [ ] Yes By
Water quality concerns? [ ] Yes (describe below) TDS amount 54 ppm

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County POLK Twp 7.00 S N/S Range 4.00 W E/W WM
Sec 24 NW 1/4 of the NW 1/4 Tax Lot 307
Tax Map Number Lot
Lat ° ' " or 44.95440469 DMS or DD
Long ° ' " or -123.13196325 DMS or DD
(○) Street address of well (●) Nearest address
4879 DAHLIA WAY NW SALEM, OR

(10) STATIC WATER LEVEL

	Date	SWL(psi)	+	SWL(ft)
Existing Well / Pre-Alteration				
Completed Well	10/21/2025			96

Flowing Artesian? [ ] Dry Hole? [ ]

WATER BEARING ZONES Depth water was first found 269.00

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
10/21/2025	269	271	20			96

(11) WELL LOG

Ground Elevation 843.12 FT

Material	From	To
Tan Brown Claystone Broken Basalt	0	16
Gray Basalt	16	96
Gray Black Basalt	96	103
Gray Basalt	103	121
Gray Black Basalt	121	218
Black Basalt	218	232
Gray Basalt	232	259
Fractured Gray Black Basalt	259	271
Gray Black Basalt	271	280

Construction Begin Date 9/20/2025 Begin Time 12 00 End Date 10/21/2025

(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 Date

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 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 1585 Date 10/23/2025

Signed RONALD SPENGLER (E-filed)
Drilling Company: Robinson Well Drilling

ORIGINAL - WATER RESOURCES DEPARTMENT

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version:
New exempt use wells must be submitted with a map and recording fee.

WATER SUPPLY WELL REPORT - Map with location identified must be attached and shall include an approximate scale and north arrow

POLK 55040

10/23/2025

Map of Hole

STATE OF OREGON
WELL LOCATION MAP

This map is supplemental to the WATER SUPPLY WELL REPORT

Oregon Water Resources Department
725 Summer St NE, Salem OR 97301
(503)986-0900

LOCATION OF WELL
Latitude: 44.95440469 Datum: WGS84
Longitude: -123.13196325
Township/Range/Section/Quarter-Quarter Section:
WM7.00S4.00W24NWNW
Address of Well:
4879 DAHLIA WAY NW SALEM, OR

Well Label: 149425

Printed: October 23, 2025

DISCLAIMER: This map is intended to represent the approximate location the well. It is not intended to be construed as survey accurate in any manner.

Provided by well constructor