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PAGE 1 OF 2 JAN 2 4 2001 STATE OF OREGON WELL I.D. # L 45724 WATER SUPPLY WELL REPORT (as required by ORS 537.765 WATER RESOURCES DEPT.

Instructions for completing this SAPEM; OREGON page of this form. START CARD # 137390 (1) LAND OWNER Name CITY OF RUFUS (9) LOCATION OF WELL by legal description:

- County SHERMAN Latitude C/O MORSE CONSTRUCTION GRP _Longitude_ 5500 SOUTH FIRST AVENUE 2N Address Township N or S Range E or W. WM. Zip 98203 NF. EVERETT City Parcel (2) TYPE OF WORK Block Subdivision New Well ☐ Deepening ☐ Alteration (repair/recondition) ☐ Abandonment Street Address of Well (or nearest address) 101 CHINA HOLLOW RD. MORO, OR (3) DRILL METHOD: Rotary Air □ Rotary Mud □ Cable □ Auger (10) STATIC WATER LEVEL: Date 01/11/01 ☐ Other_ ft. below land surface. Artesian pressure _____lb. per square inch Date ___ (4) PROPOSED USE: □ Domestic X Community □ Industrial □ Irrigation (11) WATER BEARING ZONES: ☐ Livestock ☐ Other_ ☐ Thermal ☐ Injection 220/335 Depth at which water was first found (5) BORE HOLE CONSTRUCTION: Special Construction approval Yes No Depth of Completed Well 459 ft. **Estimated Flow Rate** SWL From To Explosives used Yes No Type_ _Amount _ 205 220 335 Trace SEAL 205 335 372 150 grpm To 5 | Cem/Bent Diameter From Sacks or pounds 5 SKS+QE1 435 459 300 grpm 205 19**"** 52 190 sks+gel 52 Cem/Bent 15¹¹ 52 194 Cem/Bent <u>0</u> 194 90 skrs+gel 194 459 (12) WELL LOG: X B How was seal placed: Method $\Box A$ \square D Ground Elevation _ Other. Material To **SWL** From Backfill placed from ft. to_ ft. Material Size of gravel Basalt blocks, boulders 0 35 Gravel placed from ft. to occ.granite boulders with (6) CASING/LINER: To Gauge Steel 5 250 X Diameter 2011 Plastic Welded Threaded brown clay/claystone.silty 各各 Casing: Black&brn.basalt,broken 35 55 $+1\frac{1}{2}$ 51 $\frac{1}{2}$ 250 X 16" caving <u>12"</u> 194 250 Brown.gray-brown&black 55 108 \Box basalt.dirty.occ.grave 10" 250 X 182 442 ΓX cemented occ.clay seams 452 459 250 X \Box Gray-brn clay/claystone 108 125 Drive Shoe used ☐ Inside ☐ Outside ☐ None Brn.basalt.weath.occ. 125 166 Final location of shoe(s) gray-brown (7) PERFORATIONS/SCREENS: Method_Johnson Screen Brown basalt, firm, frac 166 180 ☐ Perforations Grav-black basalt.occ. 180 326 205 Type Pipe size Material Stainless X Screens gray-brown, hard, very hard Steel Slot Tele/pipe Liner (occ. columbar) From To Number Diameter size Casing size 10" Gray-blk.basalt,brkn.strk 326 328 205 457 .050 \mathbf{X} pipe Gray-black basalt, hard 328 335 205 Black&gray-blk,basalt, 335 372 205 lava, brkn, strks. Date started 12/04/00 Completed (8) WELL TESTS: Minimum testing time is 1 hour Flowing (unbonded) Water Well Constructor Certification: X Pump □ Bailer ☐ Artesian I certify that the work I performed on the construction, alteration, or abandon-Drill stem at Time Yield gal/min Drawdown ment of this well is in compliance with Oregon water supply well construction 450 (air) 459 1 hr. standards. Materials used and information reported above are true to the best of my knowledge and belief. 1 hr. 100 11 ft. 40 ft. 24 hrs. 200 Temperature of water_ 68°F (bonded) Water Well Constructor Certification: Depth Artesian Flow Found AMJ & LAB I accept responsibility for the construction, alteration, or abandonment work Was a water analysis done? Yes By whom _ performed on this well during the construction dates reported above. All work ☐ Too little Did any strata contain water not suitable for intended use? 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 573 ☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other ☐

Signed

Date 01/22/01

Depth of strata: _

SHER

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PAGE 2 JAN 2 4 2001 STATE OF OREGON 45724 WELL I.D. # L WATER SUPPLY WELL REPORT START CARD # 137390 (as required by ORS 537.765) WATER RESOURCES DEPT Instructions for completing this real EMpones Orige of this form. (9) LOCATION OF WELL by legal description: (1) LAND OWNER Well Number ______(County SHERMAN Latitude Name CITY OF RUFUS _Longitude _ 5500 SOUTH FIRST AVENUE N or S Range_ Township_ E or W. WM. Address NW 98203 WA **EVERETT** Section Parcel 1/4 City Block Subdivision _ (2) TYPE OF WORK New Well Deepening Alteration (repair/recondition) Abandonment Street Address of Well (or nearest address) 101 CHINA HOLLOW MORO, OR (3) DRILL METHOD: (10) STATIC WATER LEVEL: XRotary Air ☐ Rotary Mud ☐ Cable ☐ Auger Date 01/11/01 _____ft. below land surface. ☐ Other_ Artesian pressure ___ __lb. per square inch Date __ (4) PROPOSED USE: (11) WATER BEARING ZONES: ☐ Livestock ☐ Other_ ☐ Thermal ☐ Injection Depth at which water was first found (5) BORE HOLE CONSTRUCTION: Special Construction approval Yes X No Depth of Completed Well 459 ft. **SWL** From **Estimated Flow Rate** Explosives used Yes X No Type_ _Amount _ SEAL HOLE Diameter From To Material From To Sacks or pounds (12) WELL LOG: \square A $\sqcap c$ $\square D$ $\Box E$ Method \square B How was seal placed: Ground Elevation _ Other _ From To **SWL** Material Backfill placed from _____ft. to____ ft. Material 372 435 205 Gray-black basalt, hard ___ ft. to____ Size of gravel Gravel placed from ____ fract. (columbar) (6) CASING/LINER: 205 Black basalt & lava,brkn 435 445 Welded Diameter From Gauge Steel Plastic Threaded 445 459 205 Gray-black basalt,occ. Casing: hard, fract., occ. broken \Box mineral seams \Box \Box \Box Liner: \Box Drive Shoe used ☐ Inside ☐ Outside ☐ None Final location of shoe(s) (7) PERFORATIONS/SCREENS: ☐ Perforations Method ☐ Screens Material Slot Tele/pipe Casing Liner To size Number Diameter From \Box Date started Completed 01/19/0112/04/00 (8) WELL TESTS: Minimum testing time is 1 hour Flowing (unbonded) Water Well Constructor Certification: ☐ Artesian □Аіг ☐ Pump □ Bailer I certify that the work I performed on the construction, alteration, or abandon-Drill stem at Time Yield gal/min Drawdown ment 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 (bonded) Water Well Constructor Certification: _Depth Artesian Flow Found _ Temperature of water_ I accept responsibility for the construction, alteration, or abandonment work Was a water analysis done? ☐ Yes By whom _ performed on this well during the construction dates reported above. All work Did any strata contain water not suitable for intended use? ☐ Too little 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. ☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other _ WWC Number <u>573</u> Depth of strata: __

_ Date <u>01/22/01</u>