#4

STATE OF OREGON

TILL 934

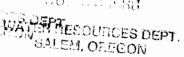
OCT 6 1988

45/10W/30C

WATER WELL REPORT (as required by ORS 537.766)	
(1) OWNER: Name PACIFIC CITY WATER DIST.	(9) LOCATION OF WELL by legal description:
Address P.O. Box 88	County Latitude Latitude Longitude Longitude Low Eor W, WM.
City PACIFIC CITY State OREG. Zip 97135	Section SW 4 WM.
(2) TYPE OF WORK:	Tax Lot Lot Block Subdivision
New Well Deepen Recondition Abandon	Street Address of Well (or nearest address)  BOB STEAUS STATE PACK
(3) DRILL METHOD  ☐ Rotary Air ☐ Rotary Mud Cable	
Other	(10) STATIC WATER LEVEL:  6. ft. below land surface.  Date 8/22/88
(4) PROPOSED USE:	Artesian pressure lb. per square inch. Date
☐ Domestic 💆 Community ☐ Industrial ☐ Irrigation	(11) WATER BEARING ZONES:
Thermal Injection Other	Depth at which water was first found
BORE HOLE CONSTRUCTION:  ANConstruction approval Yes No Depth of Completed Well 44 ft.	From To Estimated Flow Rate SWL
Yes No D	27 39 118 8'
Explosives used  Type  Amount  Amount	
HOLE SEAL Amount Diameter From To Material From To sacks or pounds	
Diameter From To Material From To sacks or rounds	(12) WELL LOG: Cround elevation
	Ground elevation
	Material From To SWL
How was seal placed: Method 🔲 A 🔲 B 💢 C 🔲 D 🔲 E	LOSE SAND AND
OtherBackfill placed from 18ft. to 48 _ft. Material MONTAN SAND	GRAVEL 16 19
Gravel placed fromft. toft. Size of gravel	LOOSE SAND 19 27 SAND AND BROWN
(6) CASING/LINER:	CLAY 27 32 8
Diameter From To Gauge Steel Plastic Welded Threaded	SAND WITH BLUE
Casing: 8 +18 27 322 N	CLAY AND SILT 32 43 8. BUE CLAY 43 45
	SAMOY BLUE CLAY
	AND WOOD 45 48
Liner:	
Final location of shoe(s)	
PERFORATIONS/SCREENS:	
Perforations Method PPE SIZE	
Screens Type Material STAINLESS	
Slot Tele/pipe From To size Number Diameter size Casing Liner	
	Date started 8/9/88 Completed 8/22/88
(2) WIN I BUSING	(unbonded) Water Well Constructor Certification:
(8) WELL TESTS: Minimum testing time is 1 hour	I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction
Pump    Bailer    Air    Artesian	standards. Materials used and information reported above are true to my best
Yield gal/min Drawdown Drill stem at Time	knowledge and belief.  WWC Number
118 11' 20hr.	Signed Date
	(bonded) Water Well Constructor Certification:
Temperature of water Depth Artesian Flow Found	I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. all
Was a water analysis done?	work performed during this time is in compliance with Oregon well
Did any strata contain water not suitable for intended use?   Too little  Salty Muddy Odor Colored Other	construction standards. This report is true to the best of my knowledge and belief.  WWC Number
Depth of strata:	Signed Date 8/24/88
White control was produced by the control of the co	DINK CONCERNICE DINK CONV. CHCEOLER



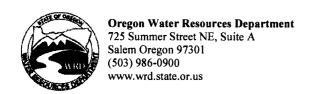
## "START CARD" NOTICE OF BEGINNING OF WELL CONSTRUCTION (as required by ORS 537.762)



This form must be completed, signed by both the owner (or authorized agent) and constructor, and the original delivered to the Water Resources Department prior to commencement of construction, alteration or abandonment of each well.

Owner's Name and Amailing Address	PACIFIC CITY WATER DIST.
Proposed Commence  Proposed Well Depth and Use:  Domestic Thermal	<i>R</i> "
Township	(N or S) Range 10E (E or W) Section
At least 2 of these must be provided	11/4 of1/4 of above section  2. street address of BOB STRAUB STATE PARK well location  3. tax lot number of well location
provided herein is acc	we have read the back of this form, and that to the best of our knowledge the information urate and the well is being properly located from septic tanks and septic drain fields.
7-2/-8 Date	Bonded Water Well Constructor  License No. 462  Company KELLING C

Note: This is not a Water Right application. The owner is responsible for obtaining a Water Right through the Water Resources Department if required.



Last Update: 4/30/14

## Application for Well ID Number

Do not complete if the well already has a Well Identification Number.

I. OWNER INFORMATION
Current Owner Name (please print): Pacific City Joint Water-Sanitary Authority (PCJWSA)
Mailing Address: PO Box 520
City, State, Zip: Pacific City, Oregon 97135
Mail Well ID Tag to: ✓ SAME AS ABOVE ✓ In Care Of (C/O)
Name & Address: Tony Owen
City, State, Zip:
II. WELL LOCATION INFORMATION (Please fill out as completely as possible)
Tax Lot: 900 (Per Map) County Tillamook 1/4 1/4
GPS Coordinates:  Bob Straub State Park
Street Address of Well, City: 2280' N and 2800' E from SW corner of Section 30, NWSW, T4S, R10W (WM)
If the property had a different street address in the past: Above is POD Location per Water Right
III. GENERAL WELL INFORMATION (Please fill out as completely as possible)  Use of Well (domestic, irrigation, commercial, industrial, monitoring): Domestic. PCJWSA ID - Well #6  Date Well Constructed (or property built): 8/22/1988 Total Well Depth: 51' Casing Diameter: 8"  Owner at time the well was constructed (if known): Pacific City Water District (PCWD)  Other Information: PCWD became PCJWSA July 1, 1998. Well Log #TILL 934.
Other Information:
SUBMITTED BY (please print): Tony Owen
PHONE: 503-965-6636
Send application to: Oregon Water Resources Department 725 Summer St NE, Suite A, Salem, Oregon 97301; or fax to (503) 986-0902. Applications are processed in the order they are received, and Well ID Numbers are mailed within 4-5 business days.
For Official Use Only by the Oregon Water Resources Department:
Received Date:  7-31-15  Well Log Number:  Well Log Number:  Well Identification #:  L-118750  RECEIVED BY OWRD

JUL **3 1** 2015

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