UNIO 50005

WELL I.D.#_

STATE OF OREGON WATER SUPPLY WELL REPORT

MIDNOUL		TIDE CALL
(as required by	ORS 537.765)	

(as required by OR	S 537.765)	

(i) OWNER: Will Number Will Number Commend Commend	WATER SUPPLY WELL REPORT (as required by ORS 537.765)	(START CARD) #	
(1) OWNER: Semi-alterior West Tripper Not Supplies County Which Longitude County Which Whic	Instructions for completing this report are on the last page of this form.		
Langitude Lang		(9) LOCATION OF WELL by legal description:	
Township	(1) OWNER: Well Number	a . I A A A A Latitude Longitude	
Common C		Township 3 S N or S Range 38 E. E or W. WM.	
Commonity Industrial Properties Commonity Properties Commonity Industrial Properties Commonity Properties Commonity Co		Services DA SUI 1/4 SF 1/4	
Second Alternation (repositive condition) Ahandoment	CAT) CITY COMPANY	Section 7 Subdivision	
Special Continued Cable Auger Continued Cable Auger Continued Cable Auger Canada Cable Auger Canada Cable Canada Canada Cable Canada Cable Canada Cable Canada Cable Canada Canada Canada Cable Canada Can	(2) TYPE OF WORK	Tax Lot Block ACONDO 1-104	
Comparison Community Industrial Irrigation Date Comparison Comparison Date Comparison			
Color Colo			
Other Othe	Rotary Air Rotary Mud Cable Auger		
Anterial pressure In press		ft. below land surface.	
Dispetite Community Industrial Impation Thereal Infection Infe	(4) PROPOSED USE:	Antesian pressurelb. per square inch. Date	
Depth at which water was first found Depth at which water was first found		(11) WATER BEARING ZONES:	
Special Construction approval vex No Depth of Completed West No Explosive used vex No Depth of Completed West No Type Amount No. Type Amount No. Type No			
Special Construction approval St. No. Depth of Completed Well From To Estimated Flow Rate SWL		Depth at which water was first found	
Explosives used Yet No Type	Special Construction approval Yes Y No Depth of Completed West ft.	C C C C C C C C C C C C C C C C C C C	
HOLE How was seal placed: Method A B C D E	Explosives used Yes No Type Amount	From	
Dianeter Prom To CE (Port O 20 Seeks or paunds O To O CE (Port O 20 Seeks or paunds O O O O O O O O O	HOLE	102 152 DECEN	
Arrows seal placed: Method A B C D E		165 240	
How was real placed: Method	14" D 270 CFMW O 20	1 7 9 9 1 2 60 1	
Coher Comment Two Colored Coher Colored Coher Comment Co		DEU 2 6 1999	
Casing C	918/19/		
How was seal placed: Method A B C D E		(12) WELLLOG: SALEM OREGON	
Other Comesty Track Abuse Size of grave Second Casing	How was seel placed: Method \(\text{A} \) \(\text{B} \) \(\text{C} \) \(\text{D} \) \(\text{E} \)	Ground Elevation	
Backfill placed from	TIOW was scal placed.		
Gravel placed from 20 ft. to 770 ft. Size of gravel 8 (6) CASING/LINER: Diameter From To Casing Steel Plastic Wedded Threaded Casing A 1		Ivialcilai	
(6) CASING/LINER: Diameter From Tay Gauge Steel Plastic Welded Threaded Casing: A'' + 26 2 3 4 4 5 5 5 5 5 5 5 5			
Diameter Front To Gauge Steel Plastic Welded Threaded SAPS 27 4 5 5 7 5 7		CLAY, BROWN 3 20	
Casing	(b) CASING/LINEX:	" SANDY 20 27	
CRAUE STUDIES Control Construction Certification: Certificatio	Diameter From 10 Gauge Steel Flashe Welded Finedees	SAND, BROWN, MED 27 45	
Liner:	Casing: 14 +201	CARGE AS ST	
Liner:			
Final location of shoe(s) (7) PERFORATIONS/SCREENS: Derforations Method Minchine Saway			
Final location of shoe(s) The perforations Carter Complete Casing Casing		BRUN CLAY FOUR DOIS INT	
Final location of shoe(s) 2		CRAIN 135	
Temperature of water Depth Artesian Flow Found Diany strata contain water not suitable for intended use? Depth of strata: Signed Date D			
Servens Type			
Screens Type Material Telepipe Slot Telepipe Size Casing Liner Slot Size Casing Liner Casing Casing Casing Liner Casing Cas	(7) PERFORATIONS/SCREENS:	000000000000000000000000000000000000000	
Screens Stot	Citofulions	COM COIRS STATE	
Solid any strata contain water not suitable for intended use? Depth of strata: Signed Depth of strata: Signed	Scients Type mildi	" 1 37/140 SIVERIUS 200 059	
(8) WELL TESTS: Minimum testing time is 1 hour Salty Muddy Odor Colored Other	Casing Liner		
(8) WELL TESTS: Minimum testing time is 1 hour Completed Completed Completed Constructor Certification:	102 132 3/16 600 14"		
(8) WELL TESTS: Minimum testing time is 1 hour Solump			
(8) WELLTESTS: Minimum testing time is 1 hour Composition Compositi			
Date started Completed C			
Cump Bailer Air Artesian			
Cump Bailer Air Artesian		7/0/74 0/6/74	
Flowing Bailer Air Artesian I certify that the work I performed on the construction, 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. Temperature of water 54	(8) WELLTESTS: Minimum testing time is 1 hour		
Bailer		(unbonded) Water Well Constructor Certification:	
Temperature of water	<u> </u>	Let in compliance with Oregon water supply well construction standards.	
Temperature of water	Time	Materials used and information reported above are true to the best of my knowledge	
Temperature of water 54 Depth Artesian Flow Found Was a water analysis done? Yes By whom Too little Salty Muddy Odor Colored Other Depth of strata: Signed Signed Signed Signed Date Other Signed Date	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	and belief.	
Temperature of water Depth Artesian Flow Found	1040 100 AO HB	MWC Number	
Temperature of water	10-10	Signed Date 19/7	
Was a water analysis done? Yes By whom Did any strata contain water not suitable for intended use? Too little Salty Muddy Odor Colored Other Depth of strata: I accept responsibility for the construction, 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. WWC Number Signed	Towards of water 5 1 Depth Artesian Flow Found	(bonded) Water Well Constructor Certification:	
Did any strata contain water not suitable for intended use? Too little Salty Muddy Odor Colored Other Depth of strata: Too little Signed Deformed 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. Signed Signed		The same possibility for the construction alteration or abandonment work	
Salty Muddy Odor Colored Other Signed	(145 ± 1140)	- I may formed on this well during the construction dates reported above. All work	
Depth of strata: Signed Signed Signed WWC Number Date 1972	Did any strata contain water not surtain to	performed during this time is in compliance with Olegon water supply that construction standards. This report is true to the best of my knowledge and belief.	
Signed			
	Depth of strata:		
	DESCRIPTION OF DEPARTMENT OF		