

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765)

WELL I.D. # L 91046START CARD # 193898

Instructions for completing this report are on the last page of this form.

(1) LAND OWNER Donna Well Number _____
Name MARK'S BEVERAGE
Address PO BOX 303
City Cona State OR Zip 97824

(2) TYPE OF WORK ☒ New Well
☐ Deepening ☐ Alteration (repair/recondition) ☐ Abandonment ☐ Conversion

(3) DRILL METHOD
☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger ☐ Cable Mud
☐ Other _____

(4) PROPOSED USE
☒ Domestic ☐ Community ☐ Industrial ☐ Irrigation
☐ Thermal ☐ Injection ☐ Livestock ☐ Other _____

(5) BORE HOLE CONSTRUCTION Special Construction: ☐ Yes ☒ No
Depth of Completed Well 463 ft.
Explosives used: ☐ Yes ☒ No Type _____ Amount _____

BORE HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or Pounds
10	6	25	Bentonite	0	25	17 sacks
6	25	463				

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E
☐ Other Poured Bentonite

Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to NONE Size of gravel _____

(6) CASING/LINER

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 6	12	440	.250	☒	☐	☐	☐
Liner:		<u>NONE</u>		☐	☐	☐	☐

Drive Shoe used ☐ Inside ☐ Outside ☐ None
Final location of shoe(s) 438' 6"

(7) PERFORATIONS/SCREENS
☐ Perforations Method _____
☐ Screens Type _____ Material _____

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
		<u>NONE</u>				☐	☐

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

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
<u>80 to 100</u>		<u>442</u>	<u>2 hrs</u>

Temperature of water 59° Depth Artesian Flow Found _____

Was a water analysis done? ☐ Yes By whom _____

Did any strata contain water not suitable for intended use? ☐ Yes ☐ No little

☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other _____

Depth of strata: _____

(9) LOCATION OF WELL (legal description)

County Union
Tax Lot 3400 Lot _____
Township 23 N or S Range 40E E or W WM
Section 20 SE 1/4 SE 1/4

Lat _____° _____' _____" or _____ (degrees or decimal)
Long _____° _____' _____" or _____ (degrees or decimal)

Street Address of Well (or nearest address)

6392 Lower Cove Rd Cove Or

(10) STATIC WATER LEVEL

68 ft. below land surface. Date 8-13-07

_____ ft. below land surface. Date _____
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES

Depth at which water was first found 430

From	To	Estimated Flow Rate	SWL
<u>430</u>	<u>435</u>	<u>80+</u>	<u>68</u>

(12) WELL LOG

Material	From	To	SWL
Top Soil	0	8	
Tan Clay	8	30	
Brown Clay & Gravel	30	40	
Seams of Clay & Gravel Various Colors	40	100	
Tan Clay	100	140	
Gray Clay & Gravel	140	185	
Gray Clay	185	240	
Blue Clay	240	255	
Dark Gray Clay	255	420	
Gray Shale	420	430	
Black Sand w/B	430	435	68'
Gray Shale	435	463	

Date Started 8-10-07 Completed 8-13-07

(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.

WWC Number 1737 Date 8-15-07

Signed Mark J. [Signature]

(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.

WWC Number 415 Date 8-15-07

Signed Robert V. [Signature]

RECEIVED

AUG 20 2007