

OCT 10 1997

MONITORING WELL REPORT

(as required by ORS 537.765 & OAR 690-240-095)

WATER RESOURCES DEPT.

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

Start Card #

EX 9
95935

(1) OWNER/PROJECT:

WELL NO. **L11543**

Name Union Pacific RR. Co.

Address 1416 Dodge St. PCB-04

City Omaha State NE Zip 68179

(2) TYPE OF WORK:

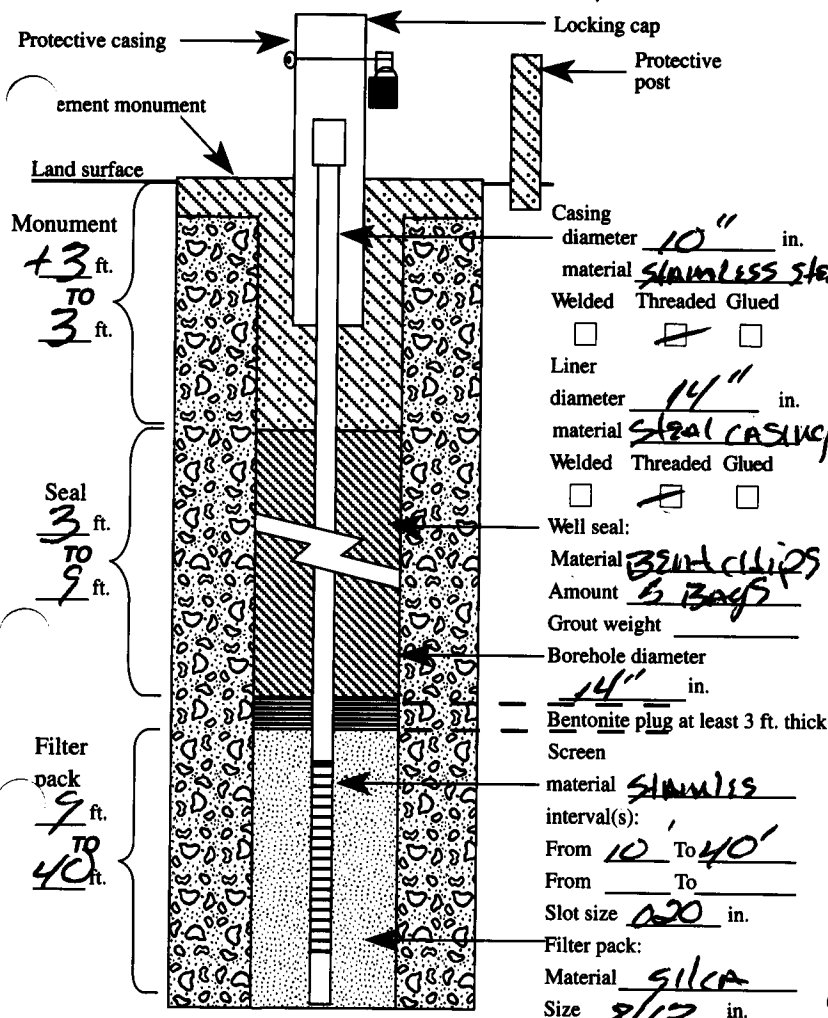
- ☒ New construction ☐ Alteration (Repair/Recondition)
☐ Conversion ☐ Deepening ☐ Abandonment

(3) DRILLING METHOD

- ☒ Rotary Air ☐ Rotary Mud ☐ Cable
☐ Hollow Stem Auger ☐ Other _____

BORE HOLE CONSTRUCTION

Special Standards ☐ Yes ☒ No Depth of completed well 40 ft.



(5) WELL TEST:

☐ Pump ☐ Bailer ☐ Air ☐ Flowing Artesian
 Permeability _____ Yield _____ GPM
 Conductivity _____ PH _____
 Temperature of water 52 °C Depth artesian flow found _____ ft.
 Was water analysis done? ☐ Yes ☐ No
 By whom? _____
 Depth of strata to be analyzed. From _____ ft. to _____ ft.
 Remarks: _____

Name of supervising Geologist/Engineer Chen Hui

(6) LOCATION OF WELL By legal description

Well Location: County WASCO
Township 1 N (N or S) Range 13 E (E or W) Section 2

1. NE 1/4 of NW 1/4 of above section.

2. Either Street address of well location
2443 The Plant Rd - The Dalles
 or Tax lot number of well location 1000

3. ATTACH MAP WITH LOCATION IDENTIFIED. Map shall include approximate scale and north arrow.

(7) STATIC WATER LEVEL:

4 Ft. below land surface. Date 9-8-67
Artesian Pressure lb/sq. in. Date

(8) WATER BEARING ZONES:

Depth at which water was first found *cf*

From	To	Est. Flow Rate	SWL

(9) WELL LOG:

Ground elevation

[illegible]

Date started 9-8-87 Completed 9-8-87

(unbonded) Monitor Well Constructor Certification:

I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Materials used and information reported above are true to the best knowledge and belief.

Signed [Signature] Date 9.9.97

(bonded) Monitor Well Constructor Certification:

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 well construction standards. This report is true to the best of my knowledge and belief.

Signed [Signature] MWC Number 10024
Date _____

MWC Number 10024

Signed [Signature] Date _____
 SECOND COPY-CONSTRUCTOR THIRD COPY-CUSTOMER

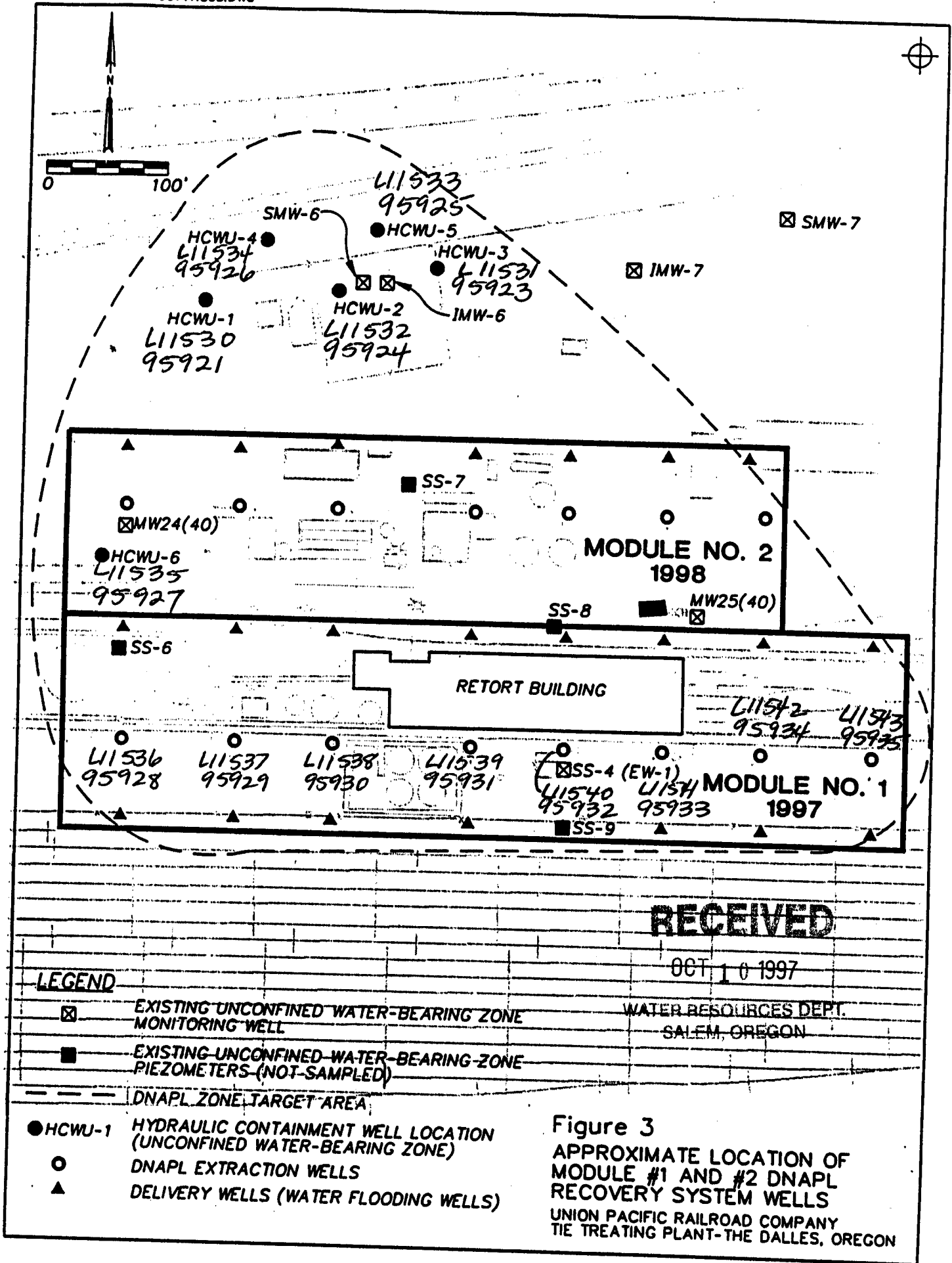


Figure 3
 APPROXIMATE LOCATION OF
 MODULE #1 AND #2 DNAPL
 RECOVERY SYSTEM WELLS
 UNION PACIFIC RAILROAD COMPANY
 TIE TREATING PLANT-THE DALLES, OREGON