AMENDED 1-14-2020 **WELL I.D. LABEL# L**| 132636 STATE OF OREGON WASC 52703 START CARD# 1044129 WATER SUPPLY WELL REPORT (as required by ORS 537.765 & OAR 690-205-0210) 1/8/2020 ORIGINAL LOG# (1) LAND OWNER Owner Well I.D First Name DOUGLAS Last Name LEE (9) LOCATION OF WELL (legal description) Company County WASCO Twp 2.00 N N/S Range 12.00 E E/W WM Address 13340 GOODALL RD. Sec 18 NE 1/4 of the SE 1/4 Tax Lot 1200 City LAKE OSWEGO State OR Zip 97034 Tax Map Number New Well (2) TYPE OF WORK Deepening Alteration (complete 2a & 10) Abandonment(complete 5a) " or DMS or DD (2a) PRE-ALTERATION Nearest address Street address of well Stl Plstc Wld Thrd 1885 DRY CREEK RD., MOSIER OR 97040 Material From To Amt sacks/lbs Seal: (10) STATIC WATER LEVEL (3) DRILL METHOD SWL(psi) SWL(ft) X Rotary Air Rotary Mud Cable Auger Existing Well / Pre-Alteration Reverse Rotary Other Completed Well X Domestic Flowing Artesian? Dry Hole? (4) PROPOSED USE Irrigation Livestock Industrial/ Commericial Dewatering WATER BEARING ZONES Depth water was first found 24.00 Thermal Injection Other SWL Date + SWL(ft) From To Est Flow SWL(psi) (5) BORE HOLE CONSTRUCTION Special Standard (Attach copy 10/29/2019 Depth of Completed Well 640.00 ft. 11/4/2019 520 540 15 425 BORE HOLE **SEAL** sacks/ 11/20/2019 620 640 425 Dia From Material From To Amt lbs 10 80 37 0 560 Bentonite Calculated 36.51 6 500 230 Cement (11) WELL LOG Calculated 140.62 Ground Elevation |X|C How was seal placed: Method | DFrom То Material X Other POURED Top Soil 3 Backfill placed from \_ ft. to \_\_\_\_ \_\_ ft. Material Brown Clay 17 Brown Sandy Clay 24 \_ ft. to ft. Material Filter pack from \_\_\_\_ Gray Basalt 142 Yes Type\_\_ Explosives used: Amount Soft Basalt 142 165 (5a) ABANDONMENT USING UNHYDRATED BENTONITE Gray Basalt 165 353 Blue Clay Wood 383 Proposed Amount Actual Amount Gray Basalt 445 (6) CASING/LINER 445 450 Dia Plstc Casing Liner From To Gauge Wld Thrd Gray Basalt/Volcanic Red Rock 450 520  $|\mathbf{X}|$  $|\mathbf{x}|$ Gray Hard Basalt 640 Inside X Outside Other Location of shoe(s) 500 Temp casing Yes Dia (7) PERFORATIONS/SCREENS Perforations Method Screens Type \_ Material Date Started 10/28/2019 Completed 11/20/2019 Perf/ Casing/ Screen Scrn/slot Slot # of Tele/ (unbonded) Water Well Constructor Certification Screen Liner From length slots pipe size 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. License Number (8) WELL TESTS: Minimum testing time is 1 hour Signed Air Flowing Artesian O Pump ( Bailer (bonded) Water Well Constructor Certification Yield gal/min Drawdown Drill stem/Pump depth Duration (hr) 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.

ORIGINAL - WATER RESOURCES DEPARTMENT

°F Lab analysis Yes By\_

Yes (describe below) TDS amount 148

Temperature 55

Water quality concerns?

License Number 1879

Signed MICHAEL MERRITT (E-filed) Contact Info (optional) Triton Burleson

Date 1/8/2020