

RECEIVED

WELL I.D.# L08747Wash
52052 APR 22 1997STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765)WATER RESOURCES DEPT.
SALEM, OREGON(START CARD) # 097807

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

(1) OWNER:

Well Number _____

Name Earle May DBA Pleasant Ridge Rv Park, Inc
Address 8175 S.W. Ellegesen
City Wilsonville State OR Zip 97070

(2) TYPE OF WORK

 New Well Deepening Alteration (repair/recondition) Abandonment

(3) DRILL METHOD:

 Rotary Air Rotary Mud Cable Auger
 Other

(4) PROPOSED USE:

 Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other

(5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes No Depth of Completed Well 320 ft.Explosives used Yes No Type _____ Amount _____

HOLE

SEAL

Diameter	From	To	Material	From	To	Sacks or pounds
<u>8</u>	<u>0</u>	<u>19</u>	<u>Bentonite</u>	<u>0</u>	<u>19</u>	<u>14</u>
	<u>19</u>	<u>520</u>				

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

Backfill placed from _____ ft. to _____ ft. Material _____

Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: <u>8</u>	<u>+1'</u>	<u>19'6"</u>	<u>250</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner: <u>6</u>	<u>+8"</u>	<u>520</u>	<u>K60</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 19'6"

(7) PERFORATIONS/SCREENS:

 Perforations Method Saw Cut Screens Type _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
<u>484</u>	<u>518</u>	<u>12</u>	<u>75</u>	<u>1/4</u>		<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

 Pump Bailer Air Flowing
 Artesian

Yield gal/min	Drawdown	Drill stem at	Time
<u>120</u>		<u>310</u>	<u>1 hr.</u>

Temperature of water 52 Depth Artesian Flow Found _____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: _____

(9) LOCATION OF WELL by legal description:

County Wash Latitude _____ Longitude _____
Township 3 N or S Range 1 E or W WM.
Section 1 NE 1/4 SW 1/4
Tax Lot 00500 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 8175 S.W. Ellegesen
Wilsonville, OR 97070

(10) STATIC WATER LEVEL:

246 ft. below land surface. Date 4-14-97
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 280

From	To	Estimated Flow Rate	SWL
<u>180</u>	<u>285</u>	<u>40</u>	<u>246</u>
<u>498</u>	<u>504</u>	<u>80</u>	<u>246</u>

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
<u>Brown Top Soil</u>	<u>0</u>	<u>3</u>	
<u>Gray weathered Basalt</u>	<u>3</u>	<u>7</u>	
<u>Gray Basalt</u>	<u>7</u>	<u>135</u>	
<u>Broken Gray Basalt</u>	<u>135</u>	<u>142</u>	
<u>Gray Basalt</u>	<u>142</u>	<u>157</u>	
<u>Red Rock</u>	<u>157</u>	<u>170</u>	
<u>Multicolored weathered Rk</u>	<u>170</u>	<u>187</u>	
<u>Brown Rk</u>	<u>187</u>	<u>215</u>	
<u>Gray Basalt</u>	<u>215</u>	<u>280</u>	
<u>Multicolored weathered Rk</u>	<u>280</u>	<u>285</u>	<u>246</u>
<u>Red & Brown weathered Rk</u>	<u>285</u>	<u>330</u>	
<u>Gray & Green weathered Rk</u>	<u>330</u>	<u>350</u>	
<u>Black Porous Rk</u>	<u>350</u>	<u>365</u>	
<u>Brown weathered Rk</u>	<u>365</u>	<u>405</u>	
<u>Red weathered Rk</u>	<u>405</u>	<u>447</u>	
<u>Gray & Green Rk</u>	<u>447</u>	<u>498</u>	
<u>Gray & Green Broken Rk</u>	<u>498</u>	<u>504</u>	<u>246</u>
<u>Gray & Black Basalt</u>	<u>504</u>	<u>523</u>	

Date started 4-7-97 Completed 4-15-97

(unbonded) Water Well Constructor Certification:

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.

Signed [Signature] WWC Number K-79 Date 4-15-97

(bonded) Water 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 water supply well construction standards. This report is true to the best of my knowledge and belief.

Signed Don Feabin WWC Number 715 Date 4-17-97