RECEIVED WASH 58471

JUN 06 2002

WATER RESOURCES DEPT
SALEM, OREGON

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765)
Instructions for completing this report are on the last page of this form.

WELL I.D. # L 55313
START CARD # 147078

(1) LAND OWNER Well Number _____
Name BAMBOO GARDENS
Address 1507 SE ALDER STREET
City PORTLAND State OR Zip 97214

(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 82 ft.
Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE Diameter	From	To	SEAL Material	From	To	Sacks or pounds
10"	0	30	Cem/Bent	0	30	22 sks
6"	30	82				

How was seal placed: Method ☐ A ☐ B ☒ C ☐ D ☐ E
☐ Other _____
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:	6"	+1	30	250	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:	4½"	-2	82	160#	☐	☒	☒	☐
					☐	☐	☐	☐

Drive Shoe used ☐ Inside ☐ Outside ☒ None
Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:
☒ Perforations Method Drilled
☐ Screens Type _____ Material PVC 160

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
62	82		80	½"		☐	☒
						☐	☐
						☐	☐
						☐	☐

(8) WELL TESTS: Minimum testing time is 1 hour
☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
50		82	1 hr.
50		30	"

Temperature of water 50°F Depth Artesian Flow Found _____
Was a water analysis done? ☒ Yes By whom AMJ
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 WASHINGTON Latitude _____ Longitude _____
Township 2N N or S Range 3W E or W. WM.
Section 13 SE 1/4 NE 1/4
Tax Lot 201 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) NW COLLINS RD. NORTH PLAINS, OR

(10) STATIC WATER LEVEL:
6 ft. below land surface. Date 05/29/02
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 36

From	To	Estimated Flow Rate	SWL
36	51	10	6
51	82	40	6

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Red brown clay	0	10	
Gray silty clay	10	15	
Gray brown gravel	15	20	
Gray sandstone	20	26	
Gray sandstone, caving	26	36	
Fine gray sandstone	36	51	6
Soft gray clay w/sand-stone	51	82	6

Date started 05/28/02 Completed 05/29/02

(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.
WWC Number 1749
Signed _____ Date 05/31/02

(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.
WWC Number 1266
Signed _____ Date 05/31/02

ORIGINAL – WATER RESOURCES DEPARTMENT FIRST COPY – CONSTRUCTOR SECOND COPY – CUSTOMER