STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

WASH 75954

9/25/2017

WELL I.D. LABEL# L 126738
START CARD # 1036034
ORIGINAL LOG #

(1) LAND OWNER

Owner Well I.D.
First Name Last Name
Company MOUNT CRUMPIT LLC
Address 16903 NW DAVIDSON RD
City BANKS State OR Zip 97106

(2) TYPE OF WORK

☒ New Well ☐ Deepening ☐ Conversion ☐ Alteration (complete 2a & 10) ☐ Abandonment(complete 5a)

(2a) PRE-ALTERATION

	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
Casing:									

	Material	From	To	Amt	sacks/lbs
Seal:					

(3) DRILL METHOD

☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger ☐ Cable Mud
☐ Reverse Rotary ☐ Other

(4) PROPOSED USE

☒ Domestic ☐ Irrigation ☐ Community
☐ Industrial/ Commericial ☐ Livestock ☐ Dewatering
☐ Thermal ☐ Injection ☐ Other

(5) BORE HOLE CONSTRUCTION

Special Standard ☐ (Attach copy)
Depth of Completed Well 390.00 ft.

BORE HOLE

Dia	From	To
10	0	95
6	95	390

SEAL

Material	From	To	Amt	sacks/lbs
Bentonite Chips	0	30	18	S
		Calculated	13.69	
Cement	30	90	22	S
		Calculated	16.1	

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E
☒ Other POURED AND PRODDED
Backfill placed from ft. to ft. Material
Filter pack from ft. to ft. Material Size
Explosives used: ☐ Yes Type Amount

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount Actual Amount

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
●	○	6	☒	1.5	118.5	.250	●	○	☒	☐
○	●	4	☐	10	390	SCD40	○	●	☒	☐
○	○		☐				○	○	☐	☐
○	○		☐				○	○	☐	☐
○	○		☐				○	○	☐	☐

Shoe ☐ Inside ☒ Outside ☐ Other Location of shoe(s) 118.5
Temp casing ☐ Yes Dia From + ☐ To

(7) PERFORATIONS/SCREENS

Perforations Method drilled
Screens Type Material

Perf/ Screen	Casing/ Screen Liner	Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ pipe size
Perf	Liner	4	330	390	.5	0.5	240	4

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

○ Pump ○ Bailer ◉ Air ○ Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
9		350	1.5

Temperature 56 °F Lab analysis ☐ Yes By
Water quality concerns? ☐ Yes (describe below) TDS amount 77 ppm

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County WASHINGTON Twp 2.00 N N/S Range 3.00 W E/W WM
Sec 20 NE 1/4 of the SW 1/4 Tax Lot 0600
Tax Map Number Lot
Lat ° ' " or DMS or DD
Long ° ' " or DMS or DD
◉ Street address of well ○ Nearest address
16903 NW DAVIDSON RD BANKS OR

(10) STATIC WATER LEVEL

	Date	SWL(psi)	+	SWL(ft)
Existing Well / Pre-Alteration				
Completed Well	9/4/2017			280

Flowing Artesian? ☐ Dry Hole? ☐

WATER BEARING ZONES Depth water was first found 310.00

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
9/4/2017	310	360	9			280

(11) WELL LOG

Ground Elevation

Material	From	To
topsoil	0	1
brwn clay	1	5
brwn and red clayw/ gravel	5	58
grey clay w/med gravel embedded	58	79
med grey claystone	79	185
black shale	185	230
dark grey claystone w/brwn sandstone str	230	300
broken basalt	300	360
grey shale	360	390

Date Started 8/31/2017 Completed 9/4/2017

(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.

License Number Date

Signed

(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.

License Number 1956 Date 9/25/2017

Signed JOHN ROSS (E-filed)

Contact Info (optional)

ORIGINAL - WATER RESOURCES DEPARTMENT

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version: