

STATE OF OREGON
WATER SUPPLY WELL REPORT

WASH 83691

WELL I.D. LABEL# L

153364

START CARD #

1081348

ORIGINAL LOG #

(as required by ORS 537.545 & 537.765 and OAR 690-205-0210)

7/17/2026

(1) LAND OWNER

Owner Well I.D. _____

First Name _____ Last Name _____

Company CHRISTIE RIDGE FARMS LLCAddress 38030 NW MOUNTAINDALE RDCity BANKS State OR Zip 97106**(2) TYPE OF WORK**☒ New Well ☐ Deepening ☐ Conversion☐ Alteration (complete 2a & 10) ☐ Abandonment (complete 5a)**(2a) PRE-ALTERATION**

Casing: Dia + From To Gauge Stl Plstc Wld Thrd

Material From To Amt sacks/lbs

Seal: _____

(3) DRILL METHOD☐ Rotary Air ☐ Rotary Mud ☒ Cable ☐ Auger☐ Reverse Rotary ☐ Other _____**(4) PROPOSED USE**☒ Domestic ☐ Irrigation ☐ Community☐ Industrial/ Commercial ☐ Livestock ☐ Dewatering☐ Thermal ☐ Injection ☐ Other _____**(5) BORE HOLE CONSTRUCTION**Special Standard ☐ (Attach copy)Depth of Completed Well 350.00 ft.

BORE HOLE				SEAL			
Dia	From	To	Material	From	To	Amt	sacks/lbs
10	0	30	Bentonite	0	30	19	S
6	30	230	Calculated			14	
8	230	248	Cement	230	248	6	S
6	248	350	Calculated			5	

Seal placement method: ☐ A ☐ B ☐ C ☒ D ☐ E ☒ Other: DRY

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

Filter pack from _____ ft. to _____ ft. Material _____ Size _____

Explosives used: ☐ Type _____ Amount _____Seal Placement Begin Date 2/27/2026 Begin Time 09 00**(5a) ABANDONMENT USING UNHYDRATED BENTONITE**

Proposed Amount _____ Actual Amount _____

(6) CASING/LINER

C/L	Dia	+	From	To	Gauge	Mat. Type	Wld	Thrd	Shoe	Location
C	6	☒	1.5	248	0.250	ST	☒		OUT.	248
L	4.5		230	350	Sch40	PL	☒			

Temp casing ☐ Yes Dia _____ From + ☐ _____ To _____**(7) PERFORATIONS/SCREENS**Perforations Method drilled

Screens Type _____ Material _____

Perf/ Screen	Casing/ Liner	Screen Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ Pipe size
Perf	Liner	4.5	290	350	.5	0.5	48	

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

Type of Test	Yield (gal/min)	Drawdown	Drill Stem/ Pump Depth	Duration (hr)
Bailer	5	330		2

Temperature 55 °F Lab analysis ☐ Yes By _____Water quality concerns? ☐ Yes (describe below) TDS amount 105 ppm

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)County WASHINGTON Twp 1.00 S N/S Range 3.00 W E/W WMSec 23 SE 1/4 of the NE 1/4 Tax Lot 100

Tax Map Number _____ Lot _____

Lat _____ " or 45.47260476 DMS or DD

Long _____ " or -123.01544086 DMS or DD

☒ Street address of well ☐ Nearest address

327755 SW JOHNSON SCHOOL RD CORNELIUS OR 97113

(10) STATIC WATER LEVEL

	Date	SWL (psi)	+	SWL (ft)
Existing Well / Pre-Alteration				
Completed Well	6/12/2026			7
Flowing Artesian? ☐ Dry Hole? ☐				

WATER BEARING ZONES

Depth water was first found 325.00

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
6/12/2026	325	335	5			7

(11) WELL LOGGround Elevation 202.89 FT

Material	From	To
brown soil	0	2
brown clay	2	11
grey clay	11	46
brown clay & sand & pea gravel	46	61
red clay	61	66
brown clay	66	90
brown clay & sand	90	107
red clay	107	112
brown sandstone soft	112	165
dark brown sandstone	165	171
brown sandstone soft	171	188
tan clay	188	195
brown rock medium	195	230
grey rock	230	350

Construction

Begin Date 2/24/2026 Begin Time 10 00 End Date 6/12/2026**(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 1430 Date 7/17/2026Signed JEFFREY HABOUSH (E-filed)Drilling Company: jeff haboush well drilling

ORIGINAL - WATER RESOURCES DEPARTMENT

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

New exempt use wells must be submitted with a map and recording fee.

WATER SUPPLY WELL REPORT - Map with location identified must be attached and shall include an approximate scale and north arrow

WASH 83691

7/17/2026

Map of Hole

STATE OF OREGON WELL LOCATION MAP

This map is supplemental to the WATER SUPPLY WELL REPORT

Oregon Water Resources Department

725 Summer St NE, Salem OR 97301
(503)986-0900



LOCATION OF WELL

Latitude: 45.47260476 Datum: WGS84

Longitude: -123.01544086

Township/Range/Section/Quarter-Quarter Section:

WM1.00S3.00W23SENE

Address of Well:

327755 SW JOHNSON SCHOOL RD CORNELIUS OR 97113

Well Label: 153364

Printed: July 17, 2026

DISCLAIMER: This map is intended to represent the approximate location the well. It is not intended to be construed as survey accurate in any manner.

Provided by well constructor

