

STATE OF OREGON
WATER WELL REPORT
(as required by ORS 537.765)

VAMH
1848

WRD
5s/3w/7db

6-13473

(START CARD) # 46212

(1) OWNER: Well Number TW-5 (#15)
Name Monrovia Nursery
Address 12600 SE Alderman Rd.
City Dayton State OR Zip 97114

(2) TYPE OF WORK:
 New Well Deepen Recondition Abandon

(3) DRILL METHOD:
 Rotary Air Rotary Mud Cable
 Other RC-dual tube

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Other test

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 19 ft.
Explosives used Yes No Type _____ Amount _____

| HOLE | | | SEAL | | | Amount sacks or pounds |
|----------|------|-----|-----------|------|----|---------------------------|
| Diameter | From | To | Material | From | To | |
| 10 | 0 | 19 | Gran Bent | 0 | 19 | 10 sks |
| 5.5 | 19 | 308 | | | | |

How was seal placed: Method A B C D E
 Other poured and probed

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

(6) CASING/LINER:

| Diameter | From | To | Gauge | Steel | | | | Welded | | Threaded | |
|-----------|------|----|-------|-------------------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|
| | | | | Steel | Plastic | Welded | Threaded | Welded | Threaded | | |
| Casing: 6 | +1 | 19 | .250 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Liner: | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:
 Perforations Method _____
 Screens Type _____ Material _____

| From | To | Slot size | Number | Diameter | Tele/pipe size | Casing | Liner |
|------|----|-----------|--------|----------|----------------|--------------------------|--------------------------|
| | | | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | | | <input type="checkbox"/> | <input type="checkbox"/> |

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air (dual tube) Flowing Artesian
Yield gal/min 50 Drawdown _____ Drill stem at 299 Time 1 hr.

Temperature of Water approx 55°F 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: SE1 9219

(9) LOCATION OF WELL by legal description:
County Yamhill Latitude _____ Longitude _____
Township 5S N or S. Range 3W E or W. WM.
Section 7 NW 1/4 of SE 1/4
Tax Lot 1500 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) owner

(10) STATIC WATER LEVEL:
>19 ft. below land surface. Date 8/6/92
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 1st significant @ 187

| From | To | Estimated Flow Rate | SWL |
|------|-----|--|------|
| 187 | 307 | total is expected to be a few hundred gpm. | N.M. |

(12) WELL LOG:
Ground elevation approx 155

| Material | From | To | SWL |
|--------------|------|----|-----|
| see attached | | | |

This well is temporarily abandoned. It is expected to be converted to a production well in the near future.

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WATER RESOURCES DEPT.
SALEM, OREGON

Date started 8/5/92 Completed 8/6/92

(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 well construction standards. Materials used and information reported above are true to my best knowledge and belief.

Signed _____ WWC Number 1367
Date 8/24/92

(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 well construction standards. This report is true to the best of my knowledge and belief.

Signed _____ WWC Number 649
Date 8/24/92

Monrovia Nursery
Test Well No. 5
by Schneider Drilling Co.
S.C. #46212

| <u>From</u> | <u>To</u> | <u>Description</u> |
|-------------|-----------|---|
| 0 | 2 | Top soil |
| 2 | 12 | Clay, gray, soft, silty |
| 12 | 24 | Clay, brown, soft, silty |
| 24 | 49 | Clay, gray, soft, silty |
| 49 | 51 | Clay, gray, med-soft |
| 51 | 55 | Clay, gray, med |
| 55 | 63 | Clay, brown, sandy, med |
| 63 | 70 | Clay, gray & brown, med-soft |
| 70 | 81 | Clay, gray, med-soft |
| 81 | 84 | Clay, gray & brown, soft, silty |
| 84 | 94 | Clay, gray, med |
| 94 | 105 | Clay, gray & brown, med-soft |
| 105 | 117 | Clay, gray & brown, med-soft, little sandy |
| 117 | 120 | Clay, gray & brown, soft, sandy |
| 120 | 127 | Clay, brown, soft, sandy |
| 127 | 129 | Clay, brown, med-soft |
| 129 | 132 | Clay, gray & brown, med-soft |
| 132 | 140 | Clay, gray & red, soft, gritty |
| 140 | 149 | Claystone, red, sandy |
| 149 | 156 | Clay, red, soft |
| 156 | 168 | Clay, brown, soft |
| 168 | 187 | Clay, red, med |
| 187 | 224 | Claystone, brown & red, sandy, fractured |
| 224 | 260 | Claystone, brown, sandy, fractured |
| 260 | 277 | Sandstone, brown & green |
| 277 | 279 | Claystone, gray, hard, fractured, vesicular |
| 279 | 306 | Sandstone, gray, fractured, vesicular |
| 306 | 307 | Sandstone, brown, fractured |
| 307 | 308 | Basalt, gray, hard |

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SALEM OREGON