

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

RECEIVED

MAR - 8 1993

3s/2w/19

(START CARD) # 44144

(1) OWNER:

Name NSP Development/Brenneke
 Address 2214 SW Hoffman
 City Portland State OR Zip 97201

Well Number 796

WATER RESOURCES DEPT.
 SALEM, OR

(2) TYPE OF WORK:

New Well Deepen Recondition Abandon

(3) DRILL METHOD:

Rotary Air Rotary Mud Cable
 Other

(4) PROPOSED USE:

Domestic Community Industrial Irrigation
 Thermal Injection Other

(5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes No Depth of Completed Well 240 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE Diameter	From To		Material	SEAL From To		Amount sacks or pounds
	From	To		From	To	
12 1/4"	0'	30	Cement	0'	35'	42 Sacks
10"	30	40				
8"	40	240				

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	Material			
				Steel	Plastic	Welded	Threaded
Casing: 8"	+ 2	38'	.25	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<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"/>

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
100 GPM		240'	1 hr.

Temperature of Water 57° 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 Yamhill Latitude _____ Longitude _____
 Township 3-S N or S. Range 2-W E or W. WM.
 Section 19/30 1/4 _____ 1/4 _____
 Tax Lot _____ Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) Dayton Av, Newberg,
Or 97132

(10) STATIC WATER LEVEL:

80' ft. below land surface. Date 3/1/93
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 190'

From	To	Estimated Flow Rate	SWL
190	220'	60 GPM	n/a

(12) WELL LOG:

Ground elevation _____

Material	From	To	SWL
Top Soil	0	3	
Brown Clay	3	25	
H. Brown Basalt	25	35	
H. Gray Basalt	35	55	
M.H. Brown Basalt	55	85	
H. Gray Basalt	85	105	
H. Gray Fractured Basalt	105	155	
H. Gray Frac./Broken Basalt	155	165	
Hard Gray Basalt	165	175	
Hard Brown Basalt	175	190	
Hard Severe Fractured Gray Bas	190	200	
H. Gray/Brown Porous Basalt	200	215	
Hard Gray Basalt	215	235	
Soft White Clay	235	240	

Date started 2/23/93 Completed 3/1/93

(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.

WWC Number _____
 Signed _____ Date _____

(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.

WWC Number 645
 Signed [Signature] Date 3/4/93