

YAMH  
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STATE OF OREGON  
WATER SUPPLY WELL REPORT

WELL I.D. # L 30239

(as required by ORS 537.765)

WATER RESOURCES DEPT.

START CARD # W- 120864

Instructions for completing this report are on the last page of this form.

SALEM, OREGON

(1) OWNER: Well Number L-30239

Name PURIPONICS

Address 806 S.W. BROADWAY, STE# 900

City PORTLAND State OR Zip 97205

(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 100 ft.

Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
10	0	96	CEMENT/ BENTONITE	0	20	24 SKS W/GEL
6	96	100				

How was seal placed: Method  A  B  C  D  E

Other

Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_

Gravel placed from 20 ft. to 96 ft. Size of gravel PEA gravel

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 8 in	+1	5	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 in	+1	96	PVC-200	<input type="checkbox"/>	<input checked="" 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 SAWSLOT

Screens Type \_\_\_\_\_ Material PVC-200

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
21	96	1/8 x 12	75			<input checked="" 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
7-8		80 - 100	1 hr.

Temperature of water 50° 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: \_\_\_\_\_

(9) LOCATION OF WELL by legal description:

County YAMHILL Latitude \_\_\_\_\_ Longitude \_\_\_\_\_

Township 3S N or S Range 3W E or W. WM.

Section 6 NE 1/4 SW 1/4

Tax Lot 1100 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_

Street Address of Well (or nearest address) NR 10911 NE HWY 240, YAMHILL, OR

(10) STATIC WATER LEVEL:

3 ft. below land surface. Date 7/1/99

Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found 25

From	To	Estimated Flow Rate	SWL
25	100	7 - 8 GPM	3

(12) WELL LOG:

Ground Elevation \_\_\_\_\_

Material	From	To	SWL
Brown clay, occ. sandy	0	15	
Brown & orange-brown sandy clay, occ. sand stone streaks.	15	50	3'
Gray silty sandstone, soft	50	54	}
Gray silty sandstone, hard, brittle.	54	57	
Gray silty sandstone, soft.	57	100	3'

Date started 6/30/99 Completed 7/1/99

(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 \_\_\_\_\_

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

WWC Number 1266

Signed [Signature] Date 4/20/99