

**STATE OF OREGON
WATER SUPPLY WELL REPORT**

Arrow 00-020-2

(as required by ORS 537.765)

(1) OWNER:

Well Number: #3

Name: Columbia Empire Farms
Address: 31461 NE Bell Road
City: Sherwood State: OR Zip: 97140

(2) TYPE OF WORK: (repair/
 New Well Deepening Alteration (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 236
Explosives Used Yes No Type _____ Amount _____

HOLE			SEAL			sacks or pounds
Diameter	From	To	Material	From	To	
10"	0	78.5	bent chps	0	5	7 bags
			cement	5	78.5	24 bags
6"	78.5	603				

How was seal placed: Method A B C D E
 Other bent chips poured-probed
Backfill placed from 280 to 603 Material 3/4" crush rock
from 236 to 280 Material neet cem.
Gravel placed from _____ to _____ Size of gravel _____

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
6"	+2	78.5	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

LINER:

4"	-5	236		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" 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: saw cut
 Screen Type: _____ Material: _____

From	To	Slot Size	No.	Diameter	Tele/pipe size	Casing	Liner
145	165	1/8x7	42	4"	pipe	<input type="checkbox"/>	<input checked="" type="checkbox"/>
216	236	1/8x7	40	4"	pipe	<input type="checkbox"/>	<input checked="" 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 gpm	Drawdown	Drill Stem at	Time
3	N/A	150	1 hr.

Temperature of water 56 Depth Artesian Flow Found _____
Was a water analysis done? _____ By whom: _____
Did any strata contain water not suitable for intended use? (explain) _____

Depth of Strata: _____

Arrow Drilling (503) 538-4422

WELL ID # L 367654
START CARD # 127488

(9) LOCATION OF WELL by legal description:

County: Yamhill Latitude: _____ Longitude: _____
Township: 3S Range: 4W
Section: 36 SW 1/4 SW 1/4
Tax Lot: 900 Lot: _____ Block: _____ Subdivision: _____
Street Address of Well (or nearest address) 6580 NE Mineral Springs Road, Carlton, Oregon 97111

(10) STATIC WATER LEVEL:
58 Ft. below land surface Date 6/28/00
Artesian pressure _____ lb. per sq. in. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 40'

From	To	Est. Flow Rate	SWL
40	45	< 1 gpm	21
145	145.5	3 gpm	58

(12) WELL LOG: Ground Elevation: _____

Material	From	To	SWL
top soil	0	1	
clay brwn silty	1	7	
clay tan very silty	7	16	
sandstone gray med-sft	16	63	
siltstone gray med	63	80	
shale gray firm w/occ hrd lense	80	182	58
sandstone green med-hrd	182	203	
siltstone firm	203	220	
shale gray firm	220	257	
siltstone gray med-hrd progressively hrder	257	455	
siltstone gray med-hrd w/frequent	455		
very hrd brwn lenses		603	

RECEIVED

JUL 28 2000

WATER RESOURCES DEPT.
SALEM, OREGON

Date Started: 6/22/00 Completed: 6/28/00

(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.

Signed _____ Date _____ WWC Number _____

(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.

Signed John R. Stiles WWC Number 1483
Date 7/27/00