

AUG 20 2001

STATE OF OREGON WATER SUPPLY WELL REPAIR WATER RESOURCES DEPT. SALEM, OREGON

WELL I.D. # L 50189 START CARD # 1393 60

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

(1) OWNER: Name Mrs. Edward M. McCollan, Address 4840 Hwy 47, City McMinnville, State OR, Zip 97128

(2) TYPE OF WORK: [X] New Well [] Deepening [] Alteration (repair/recondition) [] Abandonment

(3) DRILL METHOD: [X] Rotary Air [] Rotary Mud [] Cable [] Auger [] Other

(4) PROPOSED USE: [] Domestic [] Community [] Industrial [X] Irrigation [] Thermal [] Injection [] Livestock [] Other

(5) BORE HOLE CONSTRUCTION: Special Construction approval [] Yes [X] No Depth of Completed Well 63 ft. Explosives used [] Yes [X] No Type Amount

Table with columns: HOLE Diameter, From, To, SEAL Material, From, To, Sacks or pounds. Row 1: 14", 0, 63, Bentonite, 0, 23, 38 Bags.

How was seal placed: Method [] A [] B [] C [] D [] E [X] Other Bentonite Bags placed to minimum. Backfill placed from 23 ft. to 63 ft. Material 3/4" gravel. Gravel placed from 23 ft. to 63 ft. Size of gravel 3/4" gravel.

(6) CASING/LINER: Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Casing: 8", 12, 63, 250, [], [X], [X], [].

(7) PERFORATIONS/SCREENS: Table with columns: From, To, Slot, Number, Diameter, Material, Casing, Liner. Row 1: 43, 63, 8 Rows, 1/4" x 12" slots, 96, [X], [].

(8) WELL TESTS: Minimum testing time is 1 hour. [] Pump [] Bailer [X] Air [] Artesian. Yield gal/min 125, Drawdown 63, Drill stem at 3 hr, Temperature of water 53°.

(9) LOCATION OF WELL by legal description: County Yamhill, Township 45 N or S Range 46 E or W. WM. Section 03 SW 1/4 NE 1/4. Tax Lot R4403 to 00400. Block Subdivision. Street Address of Well (or nearest address) 4840 Hwy 47 McMinnville, OR 97128

(10) STATIC WATER LEVEL: 8 ft. below land surface. Date Aug 15 2001. Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES: Depth at which water was first found 41

Table with columns: From, To, Estimated Flow Rate, SWL. Row 1: 41, 63, 125, 8.

(12) WELL LOG: Ground Elevation

Table with columns: Material, From, To, SWL. Row 1: Top soil, 0, 4. Row 2: Brown + yellow clay, 4, 13. Row 3: Blue clay, 13, 41. Row 4: Black sand + small blue gravel, 41, 53, 8. Row 5: Blue + green sand, medium sand with medium blue gravel, 53, 63.

Cement Grout of 2 Bags placed. Angled top protector pipe placed to protect pipe and from subsidence. Sun Rays.

Date started Aug 19 2001 Completed Aug 15 2001

(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 James M. Wilcox WWC Number 765 Date Aug 15 2001