

STATE OF OREGON  
WATER SUPPLY WELL REPORT

AMENDED WELL LOG ★

WELL ID. # L 64162

(as required by ORS 537.765)

*yamh 53421*

START CARD # 159649

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

(1) LAND OWNER HILAND WATER CORPORATION Well Number 2  
 Name HILAND WATER CORPORATION  
 Address 61375 BARGER RD.  
 City ST. HELENS State OR Zip 97051

(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 486 ft.  
 Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE		SEAL		Sacks or pounds		
Diameter	From	To	Material	From	To	
10"	0	60	Cement	0	60	18 sks
8"	60	288	Cement	60	288	35 sks
6"	288	486				

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	Steel	Plastic	Welded	Threaded
Casing: 6"	+1	288	250	<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"/>

Drive Shoe used  Inside  Outside  None  
 Final location of shoe(s) \_\_\_\_\_

(7) PERFORATIONS/SCREENS:

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"/>

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

Yield gal/min	Drawdown	Drill stem at	Flowing Time
12		486	1 hr.
9		386	"

Temperature of water 56°F Depth Artesian Flow Found \_\_\_\_\_  
 Was a water analysis done?  Yes By whom AMT  
 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 24 SW 1/4 SW 1/4 ★  
 Tax Lot 5700 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address)  
22220 NE FRYER HILL RD., DUNDEE, OR 97115

(10) STATIC WATER LEVEL:  
320 ft. below land surface. Date 08/12/03  
 Artesian pressure \_\_\_\_\_ lb. per square inch Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found 378

From	To	Estimated Flow Rate	SWL
378	404	8 gpm	320
446	466	4 gpm	320

(12) WELL LOG:

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

Material	From	To	SWL
Brown clay	0	5	
Brown decomp rock	5	16	
Lt. gray-brown clay	16	31	
Brown decomp rock	31	48	
Gray-brown basalt with brown streaks	48	185	
Hard gray-brown & gray basalt	185	203	
Firm gray-brown basalt with soft streaks	203	229	
Soft gray-brown basalt	229	263	
Gray-brown&brown basalt	263	281	
Hard gray basalt	281	297	
Gray-brown basalt	297	309	
Gray-black basalt	309	356	
Gray basalt	356	378	
Gray-brown&brown basalt	378	442	320
Red-brown basalt	442	453	"
Gray-brown basalt	453	481	320
Gray basalt	481	486	

Date started 08/04/03 Completed 08/12/03

(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 Mac Bigsby WWC Number 1492 Date 12/30/03

(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 [Signature] WWC Number 1266 Date 12/30/03

**RECEIVED**  
AUG 14 2003  
WATER RESOURCES DEPT

**STATE OF OREGON  
WATER SUPPLY WELL REPORT**

WELL I.D. # L 64162  
START CARD # 159649

(as required by ORS 517.765)  
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 Other \_\_\_\_\_

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Drive Shoe used  Inside  Outside  None  
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
12		486	1 hr.
9		386	"

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Section 24 SE 1/4 SE 1/4  
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Red-brown basalt	442	453	?
Gray-brown basalt	453	481	320'
Gray basalt	481	486	

Date started 8/4/03 Completed 8/12/03

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Signed [Signature] WWC Number 1266 Date 08/12/03