

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

Arrow 07-039 - # 4 **YAMH 54900**

WELL ID # L 89925
 START CARD # 192670

(1) LAND OWNER:

Well Number: _____
 Name: John and Nancy McClintock
 Address: 6700 Hilltop Lane
 City: Dayton State: OR Zip: 97114

(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 wine tasting room

(5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes No
 Depth of Completed Well 441
 Explosives Used Yes No Type _____ Amount _____

HOLE			SEAL			sacks or pounds
Diameter	From	To	Material	From	To	
10"	0	278	bent chps	0	39	17 sacks
			cement	39	278	70 sacks
6 1/4"	278	441				

How was seal placed: Method A B C D E
 Other bent, poured - probed
 Backfill placed from _____ to _____ Material _____
 Gravel placed from _____ to _____ Size of gravel _____

(6) CASING/LINER:

CASING:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
6"	+18"	278'	.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"/>

LINER:

4 1/2"	21	401	160#	<input type="checkbox"/>	<input checked="" type="checkbox"/>	certilock	
4 1/2"	401	441	sch 40	<input type="checkbox"/>	<input checked="" type="checkbox"/>	certilock	

Drive Shoe used Inside Outside None
 Final location of Shoe(s): 278' 4 1/2" x 5" pvc reducer top of liner

(7) PERFORATIONS/SCREENS:

Perforations Method: saw cut
 Screen Type: _____ Material: _____

From	To	Slot Size	No.	Diameter	Tele/pipe size	Casing	Liner
401	441	3/16x7	72	4 1/2	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
47	N/A	440	1 hr.
28	N/A	400	1/2 hr.

Temperature of water 54 Depth Artesian Flow Found _____
 Was a water analysis done? yes By whom: Arrow
 Did any strata contain water not suitable for drinking? (explain)
 Depth of Strata: _____

ARROW DRILLING 503-2888-4422

(9) LOCATION OF WELL by legal description:

County: Yamhill Latitude: _____ Longitude: _____
 Township: 3S Range: 3W
 Section: 32 NE $\frac{1}{4}$ SW $\frac{1}{4}$
 Tax Lot: 301 Lot: _____ Block: _____ Subdivision: _____
 Street Address of Well (or nearest address) 6700 NE Hilltop Ln
Dayton, Oregon 97114

(10) STATIC WATER LEVEL:

276 Ft. below land surface Date 8/9/07
 Artesian pressure _____ lb. per sq. in. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 135'

From	To	Est. Flow Rate	SWL
135	250	< 2 gpm	dnm
379	441	47 gpm	276

(12) WELL LOG:

Ground Elevation: _____

Material	From	To	SWL
top soil	0	1	
clay brwn silty	1	6	
rock brwn decomp wthd w/some clay brwn	6	36	
basalt gray decomp wthd	36	50	
basalt gray med wthd	50	68	
basalt gray med-hrd fract	68	95	
basalt gray hrd w/occ fract	95	110	
basalt gray med-hrd fract w/occ brwn	110	135	
basalt gray/brwn slightly decomp vesic	135	168	
basalt gray med-hrd w.occ fract	168	205	
basalt gray hrd w/occ fract	205	225	
basalt gray med slightly decomp	225	232	
basalt gray hrd fract	232	250	
basalt blk hrd w/occ fract	250	285	
basalt brwn med fract	285	290	
basalt gray/brwn slightly decomp w/some clay brwn	290	321	
basalt gray hrd w/blk seams	321	379	
basalt gray/blk vesic	379	384	
basalt brwn/gray vesic w/claystone	384	390	
basalt blk hrd fract	390	405	
basalt gray hrd slight fract	405	432	
basalt gray hrd well fract	432	441	

Date Started: 8/6/07 Completed: 8/9/07

(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 _____ WWC Number _____
 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.

Signed John Stiles WWC Number 1483
 Date 8/20/01

RECEIVED