

STATE OF OREGON

WATER SUPPLY WELL REPORT

(as required by ORS 537.765 & OAR 690-205-0210)

07-19-2011

WELL LABEL # L 79387

START CARD # 1013345

(1) LAND OWNER Owner Well I.D. First Name Last Name Company Oregon Park & Recreation Dept. Address 725 Summer St. NE Suite C City Salem State Or Zip 97301

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

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

(4) PROPOSED USE [] Domestic [] Irrigation [] Community [] Industrial/ Commercial [] Livestock [] Dewatering [] Thermal [] Injection [x] Other NON COMMUNITY TRANSIENT

(5) BORE HOLE CONSTRUCTION Special Standard [] (Attach copy) Depth of Completed Well ft. BORE HOLE SEAL Material From To Amt lbs

How was seal placed: Method [] A [] B [] C [] D [] E [x] Other Poured Backfill placed from ft. to ft. Material Filter pack from ft. to ft. Material Size Explosives used: [] Yes Type Amount

(6) CASING/LINER Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd Shoe [] Inside [] Outside [] Other Location of shoe(s) Temp casing [x] Yes Dia 10 From 1 To 9

(7) PERFORATIONS/SCREENS Perforations Method Screens Type Material Perf/S Casing/ Screen green Liner Dia From To Scrn/slot width Slot length # of slots Tele/ pipe size

(8) WELL TESTS: Minimum testing time is 1 hour [] Pump [] Bailer [] Air [] Flowing Artesian Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)

Temperature °F Lab analysis [] Yes By Water quality concerns? [] Yes (describe below) From To Description Amount Units

(9) LOCATION OF WELL (legal description) County Yamhill Twp 5.00 S N/S Range 3.00 W E/W WM Sec 33 SW 1/4 of the NW 1/4 Tax Lot 600 Tax Map Number Lot Lat Long [x] Street address of well [] Nearest address

Maud Williams State Park 22800 Wallace Road. NW Salem, OR 97304

(10) STATIC WATER LEVEL Date SWL(psi) + SWL(ft) Existing Well / Predeepening Completed Well Flowing Artesian? [] Dry Hole? []

WATER BEARING ZONES Depth water was first found SWL Date From To Est Flow SWL(psi) + SWL(ft)

(11) WELL LOG Ground Elevation Material From To

Date Started 05-16-2011 Completed 05-16-2011

(unbonded) Water Well Constructor Certification I certify that the work I performed on the construction, deepening, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. License Number Date Electronically Filed Signed

(bonded) Water Well Constructor Certification I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above. License Number 1679 Date 07-19-2011 Electronically Filed Signed THOMAS R DANNISON JR (E-filed) Contact Info (optional) Turner Well Drilling (503)543-8383 (503)438-0593

