

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

WELL I.D. LABEL# L 128828
START CARD # 208754
ORIGINAL LOG #

(1) LAND OWNER
Owner Well I.D. _____
First Name _____ Last Name _____
Company Dayton Natural Meats, LLC
Address 13245 SE Fletcher RD
City Dayton State OR Zip 97114

(2) TYPE OF WORK New Well Deepening Conversion
 Alteration (complete 2a & 10) Abandonment (complete 5a)

(2a) PRE-ALTERATION
Dia + From To Gauge Stil Plstc Wld Thrd
Casing: _____
Material From To Amt _____
Seal: _____

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

(4) PROPOSED USE
 Industrial/ Commercial Domestic Irrigation Livestock Dewatering
 Thermal Injection Other

(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)
Depth of Completed Well 136 ft.
BORE HOLE SEAL
Dia From To Material From To Amt sacks/lbs
10 0 139 Cement 0 65 62 sks
Calculated 24
How was seal placed: Method A B C D E
Backfill placed from 136 ft. to 139 ft. Material CSSI 8x12
Filter pack from 65 ft. to 136 ft. Material CSSI Size 8x12
Explosives used: Yes Type _____ Amount _____

(5a) ABANDONMENT USING UNHYDRATED BENTONITE
Proposed Amount _____ Actual Amount _____

(6) CASING/LINER
Casing Liner Dia + From To Gauge Stil Plstc Wld Thrd
6 + 2 86 .250
6 101 116 .250
6 131 136 .250
Shoe Inside Outside Other Location of shoe(s) _____
Temp casing Yes Dia _____ From _____ To _____

(7) PERFORATIONS/SCREENS
Perforations Method _____
Screens Type V-shaped wire wrap Material 304SS
Perf/ Casing/ Screen Dia From To Scrn/slot Slot # of Tele/ width length slots pipe size
Scrn Liner 6 86 101 .040 _____ PS
Scrn 6 116 131 .040 _____ PS

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)
5 30 134 1
5 30 129 4
Temperature 54 °F Lab analysis Yes By _____
Water quality concerns? Yes (describe below) TDS amount 110
From To Description Amount Units

(9) LOCATION OF WELL (legal description)
County Yamhill Twp 4 S N/S Range 3 W E/W WM
Sec 18 NW 1/4 of the SE 1/4 Tax Lot 800
Tax Map Number 4 3 18 Lot _____
Lat _____ " or _____ DMS or DD
Long _____ " or _____ DMS or DD
 Street address of well Nearest address
13475 SE Fletcher RD, Dayton OR

(10) STATIC WATER LEVEL

Existing Well / Pre-Alteration Completed Well	Date	SWL(psi)	+	SWL(ft)
	<u>12-7-18</u>			<u>48</u>

Flowing Artesian? Dry Hole?
WATER BEARING ZONES Depth water was first found 89

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
<u>12-7-18</u>	<u>118</u>	<u>100</u>	<u>5</u>			<u>48</u>

(11) WELL LOG Ground Elevation _____

Material	From	To
Top Soil	0	3
Clay, brown, medium	3	25
Clay, dark brown, soft	25	42
Clay, blue grey, med, silty	42	47
Sand, brown, fine to medium	47	55
Clay, blue, medium, sandy/silty	55	72
Clay, grey & brown, medium	72	84
Clay, brown, medium, some sand, black, fine	84	89
Sand, black, fine w/clay, blue green	89	100
Clay, orange brown, medium, sandy	100	118
Sand, grey, fine	118	132
Claystone, orange brown, hard to medium, sandy/silty	132	139

Date Started 11-26-18 Completed 12-7-18

(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. Materials used and information reported above are true to the best of my knowledge and belief.
License Number 1927 Date 12/27/18
Signed Ryan Ind

(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. 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.
License Number 649 Date 12/27/18
Signed Stephen J. Schmidt
Contact Info (optional) _____