

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

YAMH 58496

9/23/2020

WELL I.D. LABEL# L 136467
START CARD # 1049018
ORIGINAL LOG #

(1) LAND OWNER
Owner Well I.D. 02
First Name Last Name
Company TRAPPIST ABBEY OF OUR LADY OF GUADALUPE
Address 9200 NE ABBEY RD
City CARLTON State OR Zip 97111

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

(2a) PRE-ALTERATION
Dia + From To Gauge Stl Plstc Wld Thrd
Casing: Material From To Amt sacks/lbs
Seal: Material From To Amt sacks/lbs

(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 Other

(5) BORE HOLE CONSTRUCTION
Special Standard (Attach copy)
Depth of Completed Well 126.00 ft.

Table with columns: Dia, From, To, Material, SEAL, Amt, sacks/lbs. Row 1: 10, 0, 126, Cement w/5% Bentonite, 0, 51, 13, S. Row 2: Calculated, 10.

How was seal placed: Method A B C D E
Other

Backfill placed from ft. to ft. Material

Filter pack from 51 ft. to 126 ft. Material GRAVEL Size pea gravel

Explosives used: Yes Type Amount

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

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

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

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

Table with columns: Pump, Bailer, Air, Flowing Artesian, Yield gal/min, Drawdown, Drill stem/Pump depth, Duration (hr). Row 1: 21, 124, 1.

Temperature 62 °F Lab analysis Yes By SDI, Iron 0.5 ppm
Water quality concerns? Yes (describe below) TDS amount 84 ppm
From To Description Amount Units

(9) LOCATION OF WELL (legal description)
County YAMHILL Twp 3.00 S N/S Range 3.00 W E/W WM
Sec 30 SE 1/4 of the NE 1/4 Tax Lot 200
Tax Map Number 3.3.29 Lot
Lat " or 45.28094000 DMS or DD
Long " or -123.09732900 DMS or DD
Street address of well Nearest address

9200 NE ABBEY RD, CARLTON, OR 97111

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Pre-Alteration
Completed Well 9/22/2020 2 4.6
Flowing Artesian? Dry Hole?

Table with columns: SWL Date, From, To, Est Flow, SWL(psi), + SWL(ft). Rows for dates 9/17/2020, 9/18/2020, 9/22/2020.

(11) WELL LOG
Ground Elevation 219.00

Table with columns: Material, From, To. Rows: Topsoil, brown; Clay, brown sandy; Clay, gray & blue; Sandstone, brown & black seams; Clay w/claystone, gray; Shale, blue; Claystone w/clay seams, gray; Shale, tan fractured; Clay w/claystone seams, gray; Clay, gray w/sand seams, multicolored; Cemented sand, gray w/sand seams, mc; Shale, brown fractured; Claystone, gray; Siltstone, tan & black.

Date Started 9/17/2020 Completed 9/22/2020

(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 1884 Date 9/23/2020
Signed JUSTIN MELONUK (E-filed)

(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 2006 Date 9/23/2020
Signed CHRISTEN BLAND (E-filed)
Contact Info (optional) SKYLES WELL DRILLING 503-656-2683

WATER SUPPLY WELL REPORT - Map with location identified must be attached and shall include an approximate scale and north arrow

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Map of Hole

