

STATE OF OREGON
WATER SUPPLY WELL REPORT

YAMH 59917

WELL I.D. LABEL#	L 159783
START CARD #	1082652
ORIGINAL LOG #	

(as required by ORS 537.545 & 537.765 and OAR 690-205-0210)

7/22/2026

(1) LAND OWNER

Owner Well I.D. 26-21-2

First Name _____ Last Name _____
 Company ROCKYFORD YAMHILL 2 LLC
 Address PO BOX 82106
 City BAKERSFIELD State CA Zip 93380

(2) TYPE OF WORK
☒ New Well ☐ Deepening ☐ Conversion

☐ Alteration (complete 2a & 10) ☐ Abandonment (complete 5a)
(2a) PRE-ALTERATION

Casing: Dia + From To Gauge Stl Plstc Wld Thrd
 Material From To Amt sacks/lbs
 Seal: _____

(3) DRILL METHOD
☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger
☐ Reverse Rotary ☐ Other _____
(4) PROPOSED USE
☐ Domestic ☒ Irrigation ☐ Community
☐ Industrial/ Commercial ☐ Livestock ☐ Dewatering
☐ Thermal ☐ Injection ☐ Other _____
(5) BORE HOLE CONSTRUCTIONSpecial Standard ☐ (Attach copy)Depth of Completed Well 121.00 ft.

BORE HOLE				SEAL			
Dia	From	To	Material	From	To	Amt	sacks/lbs
10	0	45	Bentonite Chips	0	45	20	S
6	45	121			Calculated	20.54	
					Calculated		

Seal placement method: ☐ A ☐ B ☐ C ☐ D ☐ E ☒ Other: BENT POURED-PROBE

Backfill placed from _____ ft. to _____ ft. Material _____

Filter pack from _____ ft. to _____ ft. Material _____ Size _____

Explosives used: ☐ Type _____ Amount _____Seal Placement Begin Date 7/14/2026 Begin Time 14 00**(5a) ABANDONMENT USING UNHYDRATED BENTONITE**

Proposed Amount _____ Actual Amount _____

(6) CASING/LINER

C/L	Dia	+	From	To	Gauge	Mat. Type	Wld	Thrd	Shoe Location
C	6	☒	2	45	0.250	ST	☒		OUT. 45
L	4.5		21	121	Sch40	PL		☒	

Temp casing ☒ Yes Dia 10 From + ☐ 0 To 6**(7) PERFORATIONS/SCREENS**

Perforations Method _____

Screens Type slotted Material PVC

Perf/ Screen	Casing/ Liner	Screen Dia	From	To	Scrm/slot width	Slot length	# of slots	Tele/ Pipe size
Screen	Liner	4.5	61	81	.032			Pipe Size
Screen	Liner	4.5	101	121	.032			Pipe Size

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

Type of Test	Yield (gal/min)	Drawdown	Drill Stem/ Pump Depth	Duration (hr)
Air	19.5		99	1

Temperature 53 °F Lab analysis ☐ Yes By _____Water quality concerns? ☐ Yes (describe below) TDS amount 80 ppm

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)County YAMHILL Twp 3.00 S N/S Range 5.00 W E/W WMSec 12 NW 1/4 of the NW 1/4 Tax Lot 300

Tax Map Number _____ Lot _____

Lat _____ " or 45.33081000 DMS or DD

Long _____ " or -123.25502000 DMS or DD

☐ Street address of well ☒ Nearest address

NYA NEXT TO 16735 NW ROCKYFORD RD YAMHILL, OR 97148

(10) STATIC WATER LEVEL

	Date	SWL (psi)	+	SWL (ft)
Existing Well / Pre-Alteration				
Completed Well	7/14/2026			32
Flowing Artesian?	☐			
Dry Hole?	☐			

WATER BEARING ZONES

Depth water was first found 34.00

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
7/14/2026	34	35	0.5			32
7/14/2026	56	81	19.5			32

(11) WELL LOGGround Elevation 477.93 FT

Material	From	To
top soil	0	1.5
clay brwn to tan firm	1.5	18
clay gray stiff	18	21
shale/claystone gray wthd seamy	21	25
shale claystonew gray firm w/hrd lenses	25	56
sandstone congl gray	56	67
shale gray firm to hrd w/fractures	67	96
siltstone gray firm	96	98
shale brwn firm	98	121

Construction

Begin Date 7/13/2026 Begin Time 07 30 End Date 7/14/2026**(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 _____ Date _____

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. 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 1483 Date 7/22/2026Signed JOHN STADELI (E-filed)Drilling Company: Arrow Drilling 503-538-4422

ORIGINAL - WATER RESOURCES DEPARTMENT

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version:

New exempt use wells must be submitted with a map and recording fee.

Comments/Remarks

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

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7/22/2026

Map of Hole

STATE OF OREGON WELL LOCATION MAP

This map is supplemental to the WATER SUPPLY WELL REPORT

Oregon Water Resources Department

725 Summer St NE, Salem OR 97301
(503)986-0900



LOCATION OF WELL

Latitude: 45.33081000 Datum: WGS84

Longitude: -123.25502000

Township/Range/Section/Quarter-Quarter Section:

WM3.00S5.00W12NWNW

Address of Well:

NYA NEXT TO 16735 NW ROCKYFORD RD YAMHILL, OR 97148

Hole Nbr: 159783

Printed: July 16, 2026

DISCLAIMER: This map is intended to represent the approximate location the well. It is not intended to be construed as survey accurate in any manner.

Provided by well constructor

