

RECEIVED

CLAC 50840

STATE OF OREGON AUG - 9 1996 WELL I.D.# [redacted] WATER SUPPLY WELL REPORT (as required by ORS 537.765) WATER RESOURCES DEPT. Instructions for completing this report are on the last page of this form.

102825 [redacted] (START CARD) # 86715

(1) OWNER: Well Number [redacted] Name PETE'S MOUNTAIN WATER CO INC. Address P.O. BOX 418 City CANBY State OR Zip 97013

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

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

(4) PROPOSED USE: [] Domestic [X] Community [] Industrial [] Irrigation [] Thermal [] Injection [] Livestock [] Other

(5) BORE HOLE CONSTRUCTION: Special Construction approval [] Yes [X] No Depth of Completed Well 910 ft. Explosives used [] Yes [X] No Type Amount

Table with columns: HOLE Diameter, From, To, Material, SEAL From, To, Sacks or pounds. Rows: 15" 60 742 Cement 64 742 575 sks., 10" 742 910, 20" 0 64 Cement 0 64 62 sks.

How was seal placed: Method [] A [] B [X] C [X] D [] E [] Other Backfill placed from ft. to ft. Material Gravel placed from ft. to ft. Size of gravel

(6) CASING/LINER: Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Rows for Casing (16", 10") and Liner.

(7) PERFORATIONS/SCREENS: Table with columns: From, To, Slot size, Number, Diameter, Material, Casing, Liner. Includes checkboxes for Perforations and Screens.

(8) WELL TESTS: Minimum testing time is 1 hour [] Pump [] Bailer [X] Air [] Artesian Yield gal/min 150 Drawdown Drill stem at 910 Time 1 hr.

Temperature of water 57°F Depth Artesian Flow Found Was a water analysis done? [] Yes By whom Did any strata contain water not suitable for intended use? [] Too little [] Salty [] Muddy [] Odor [] Colored [] Other Depth of strata:

(9) LOCATION OF WELL by legal description: County Clackamas Latitude Longitude Township 3S N or S Range 1E B or W. WM. Section 4 SW 1/4 NE 1/4 Tax Lot 301 Lot Block Subdivision Street Address of Well (or nearest address) 1277 SW Schaeffer Rd West Linn, OR

(10) STATIC WATER LEVEL: 678 ft. below land surface. Date 7-17-96 Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES: Depth at which water was first found 905'

Table with columns: From, To, Estimated Flow Rate, SWL. Row: 905, 910, 150 gpm, 678

(12) WELL LOG: Ground Elevation

Table with columns: Material, From, To, SWL. Rows: Topsoil, Brown clay, Soft decomp. brown basalt, Soft decomp. gray-brn. basalt, Broken brown basalt, Firm gray-brn. basalt, Firm red basalt, Firm brown basalt, Hard gray basalt, Firm gray-brown basalt, Soft brown basalt, Firm gray-brn. basalt, Hard gray basalt, Soft brown basalt, Firm gray-brn. basalt, Hard gray basalt, Soft brown basalt, Firm gray-brn. basalt, Hard gray basalt, Firm gray-brown basalt, Soft brown basalt.

Date started 5-2-96 Completed 7-17-96

(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. WWC Number Signed 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. WWC Number 1266 Signed Date 7-26-96

RECEIVED

CLAC 50840

WELL I.D.# 102825

STATE OF OREGON WATER SUPPLY WELL REPORT 1996

AUG 9 1996

(START CARD) # 86715

Instructions for completing this report are on the reverse side of this form.

WATER RESOURCES DEPT.

SALEM, OREGON

(1) OWNER: Name PETE'S MOUNTAIN WATER CO INC. Address P.O. BOX 418 City CANBY State OR Zip 97013

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

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

(4) PROPOSED USE: [] Domestic [X] Community [] Industrial [] Irrigation [] Thermal [] Injection [] Livestock [] Other

(5) BORE HOLE CONSTRUCTION: Special Construction approval [] Yes [] No Depth of Completed Well 910 ft.

Table with columns for HOLE Diameter, From, To, Material, SEAL From, To, Sacks or pounds

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

Backfill placed from ft. to ft. Material

Gravel placed from ft. to ft. Size of gravel

(6) CASING/LINER: Table with columns for Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded

(7) PERFORATIONS/SCREENS: Table with columns for From, To, Slot size, Number, Diameter, Material, Casing, Liner

(8) WELL TESTS: Minimum testing time is 1 hour. [] Pump [] Bailer [] Air [] Flowing [] Artesian

Temperature of water Depth Artesian Flow Found Was a water analysis done? [X] Yes By whom

(9) LOCATION OF WELL by legal description: County Clackamas Latitude Longitude Township 3S N or S Range 1E E or W. WM. Section 4 SW 1/4 NE 1/4 Tax Lot 301 Lot Block Subdivision Street Address of Well (or nearest address) 1277 SW Schaeffer Rd West Linn, OR

(10) STATIC WATER LEVEL: 678 ft. below land surface. Date 7-17-96 Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES: Table with columns for From, To, Estimated Flow Rate, SWL

(12) WELL LOG: Ground Elevation

Table with columns for Material, From, To, SWL. Lists various basalt types and depths.

Date started 5-2-96 Completed 7-17-96

(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.

(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.

WVC Number 1266 Date 7-26-96

RECEIVED

CLAC 50840

STATE OF OREGON WATER SUPPLY WELL REPORT (as required by ORS 537.765) WATER RESOURCES DEPT. SALEM, OREGON

AUG - 9 1996

(START CARD) # 86715

(1) OWNER: Name PETE'S MOUNTAIN WATER CO. INC. Address P.O. BOX 418 City CANBY State OR Zip 97013

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

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

(4) PROPOSED USE: [] Domestic [X] Community [] Industrial [] Irrigation [] Thermal [] Injection [] Livestock [] Other

(5) BORE HOLE CONSTRUCTION: Special Construction approval [] Yes [] No Depth of Completed Well 910 ft. Explosives used [] Yes [] No Type Amount

Table with columns: HOLE Diameter, From, To, SEAL Material, From, To, Sacks or pounds

How was seal placed: Method [] A [] B [] C [] D [] E [] Other Backfill placed from ft. to ft. Material Gravel placed from ft. to ft. Size of gravel

(6) CASING/LINER: Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded

(7) PERFORATIONS/SCREENS: Table with columns: From, To, Slot size, Number, Diameter, Material, Tela/pipe size, Casing, Liner

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

Temperature of water Depth Artesian Flow Found Was a water analysis done? [] Yes By whom Did any strata contain water not suitable for intended use? [] Too little [] Salty [] Muddy [] Odor [] Colored [] Other Depth of strata:

(9) LOCATION OF WELL by legal description: County Clackamas Latitude Longitude Township 3S N or S Range 1E E or W. WM. Section 4 SW 1/4 NE 1/4 Tax Lot 301 Lot Block Subdivision Street Address of Well (or nearest address) 1277 SW Schaeffer Rd. West Linn, OR

(10) STATIC WATER LEVEL: 678 ft. below land surface. Date 7-17-96 Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES: Table with columns: From, To, Estimated Flow Rate, SWL

(12) WELL LOG: Ground Elevation

Table with columns: Material, From, To, SWL. Entries include: Broken brown & gray-brn. basalt, Broken/caving brown, gray-brown basalt (cemented through)

Date started 5-2-96 Completed 7-17-96 (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.

WWC Number Signed 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.

WWC Number 1266 Signed Date 7-26-96

clac
52191

RECEIVED

WELL I.D.# 102825

STATE OF OREGON SEP - 8 1997

WATER SUPPLY WELL REPORT

(as required by ORS 537.001) WATER RESOURCES DEPT.

(START CARD)# 95176
Previous S.C. #86715

Instructions for completing this report are on the last page of this form.

(1) OWNER: Well Number _____
Name Pete's Mountain Water Co., Inc.
Address P.O. Box 418
City Canby State OR. Zip 97013

(2) TYPE OF WORK
 New Well Deepening Alteration (repair/recondition) Abandonment

(3) DRILL METHOD:
 Rotary Air Rotary Mud Cable Auger
 Other _____

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other _____

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 1052 ft.
Explosives used Yes No Type _____ Amount _____

HOLE		SEAL				
Diameter	From To	Material	From To	Sacks or pounds		
*10	910 1052	Not Changed				
*Tubex						

How was seal placed: Method A B C D E
 Other _____
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: <u>Not Changed</u>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner: <u>8</u>	<u>730</u>	<u>1052</u>	<u>.250</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 1052 (tubex)

(7) PERFORATIONS/SCREENS:

Perforations Method air rotary
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
900	1045	.2x1	3500			<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Flowing Artesian Time
*122		1052	1 hr.
45		880	1 hr.

*before perforating

Temperature of water approx 57°F Depth Artesian Flow Found _____
Was a water analysis done? Yes By whom _____
Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
Depth of strata: _____

(9) LOCATION OF WELL by legal description:
County Clack Latitude _____ Longitude _____
Township 3S N or S Range 1E E or W. WM.
Section 4 SW 1/4 NE 1/4
Tax Lot 301 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 1277 SW Schaeffer Rd.
West Linn, OR.

(10) STATIC WATER LEVEL:
768 ft. below land surface. Date 8/27/97
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found SWL (see block 10)

From	To	Estimated Flow Rate	SWL
910	1044	see (8)*	see (10)

*Well is probably capable of several hundred gpm but deep SWL and porous/broken rock significantly reduced air test effectiveness.

(12) WELL LOG:
Ground Elevation approx. 775' Msl

Material	From	To	SWL
Basalt, grey, bkn, ves, med	910	919	
Basalt, grey/brn, frac, ves, med	919	951	
Basalt, grey/brn/yel, ves, soft	951	981	
Basalt, rusty grey, frac, ves, med	981	1001	
Basalt, rusty grey, bkn, ves, med	1001	1021	
Basalt, grey/brn, bkn, ves, med	1021	1044	
Basalt, grey/brn, frac, med-brd	1044	1052	

Date started 3/10/97 Completed 8/27/97

(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 [Signature] WWC Number 1633
Date 9/5/97

(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 [Signature] WWC Number 649
Date 9/5/97

SET 9718