

CLAC 59817
Westerberg Drilling, Inc.
36728 S. Kropf Rd.
Molalla, OR 97038

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765)

WELL I.D. # L 66761
 START CARD # 161162

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

(1) LAND OWNER Well Number #2
 Name LEO GENTRY WHOLESALE NURSERY INC.
 Address PO BOX 645
 City GRESHAM State OR Zip 97030

(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 1172 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
16"	0	382	Cement	0	382	151 sacks
12"	382	847	Cement	750	847	45 sacks
8"	847	1535	Cement	1172	1535	112 sacks

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:	12"	+1	382	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	8"	+1.5	847	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:	NONE				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
 Final location of shoe(s) 12" @ 382' 8" @ 847'

(7) PERFORATIONS/SCREENS:
 Perforations Method HOLTE AIR PERF.
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
700	725	1/4x3	960			<input checked="" type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
150	550'		4-hr.
125	510'		7-hr.

Temperature of water 68° Depth Artesian Flow Found _____

Was a water analysis done? Yes No
 Did any strata contain water not suitable for intended use? Too little

Depth of strata: _____
 FFB 18 2004

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(9) LOCATION OF WELL by legal description:
 County CLACKAMAS Latitude _____ Longitude _____
 Township 3S N or S Range 4E E or W. WM.
 Section 6 NW 1/4 NE 1/4
 Tax Lot 1400 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) 29880 SE FOLSOM RD.
EAGLE CREEK, OR 97022

(10) STATIC WATER LEVEL:
145 ft. below land surface. Date 1-20-04
 Artesian pressure _____ lb. per square inch Date _____

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

From	To	Estimated Flow Rate	SWL
0'	382'	DRILLED W/ MUD	
710'	725'	50-60 GPM	145'
895'	900'		145'
950'	960'	100 GPM approx	145'
1240'	1420'	<10 GPM	187'

(12) WELL LOG:
 Ground Elevation _____

Material	From	To	SWL
cobbles & gravel large	0	35	
cemented gravel	35	40	
cobbles & gravel	40	55	
clay brown w/ gravel	55	65	
clay grey w/ gravel	65	80	
clay blue med	80	112	
clay grey	112	138	
clay green	138	195	
clay grey & green	195	220	
packed sand	220	230	
clay grey	230	242	
pumice & sand	242	247	
clay green sticky	247	280	
clay grey & grn stickv	280	318	
clay white & grn soft	318	330	
claystone green	330	343	
lava lavender	343	354	
lava grey hard	354	365	
continued on page 2			

Date started 11-21-03 Completed 1-20-04

(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 1358
 Date 1-27-04

(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 688
 Date 1-27-04



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WELL ID# L 66761

OWNER: LEO GENTRY WHOLESALE NURSERY INC.

ADDRESS: PO BOX 645

CITY/STATE/ZIP: GRESHAM, OR 97030

WELL ADDRESS: 29880 SE FOLSOM RD. EAGLE CREEK, OR 97022

COUNTY CLACKAMAS TOWNSHIP 3S RANGE 4E

SECTION 6 NW 1/4 NE 1/4 TAX LOT 1400

MATERIAL	FROM	TO	SWL
lava grey & lavender	365	400	
lava multi-colors	400		
grey w/ brown & red		455	
lava w/ white pumice	455	480	
lava harder	480	500	
lava mostly brown & grey	500	630	
lava more grey w/ brown	630	645	
lava harder	645	665	
lava brown	665	675	
lava grey & brown	675	710	
lava softer & fractured	710		
brown & grey		725	
clay grey w/ wood	725	735	
clay blue	735	743	
claystone brown	743	750	
claystone blue	750	815	
basalt dark grey w/ green	815		
interbeds		830	
basalt grey hard	830	865	
basalt weathered softer	865		
multi-color		880	
basalt grey harder w/ green	880		
fractures		900	
basalt grey hard	900	945	
basalt fractured & porous	945	960	
basalt grey harder	960	1023	
basalt grey med w/ green	1023	1034	
basalt grey hard	1034	1065	
basalt grey w/ green porous	1065	1085	
basalt grey w/ green hard	1085	1125	
basalt harder	1125	1139	
basalt grey w/ green porous	1139	1148	
basalt grey hard	1148	1167	
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