

Mari Pg. # 1 of 2  
53350

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

WELL I.D.# 48278 (START CARD) # 106205

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

(1) OWNER: Well Number #4  
Name Ted Painter  
Address 3859 Laguna Bay rd.  
City Newport State OR Zip 97365

(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 400' ft.  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE		SEAL	
Diameter	From To	Material	From To Sacks or pounds
10"	0' 20'	Cement	0' 20' 8 sacks
8"	20' 58.5'	Cement	50' 58.5' 4 sacks
5.5"	58.5' 400'		

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: 6"	1.5'	58.5'	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) \_\_\_\_\_

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Diameter	Material	Tele/pipe size	Casing	Liner
<b>RECEIVED</b>								
<b>SEP 10 1998</b>								

(8) WELL TESTS: Minimum to WATER RESOURCES DEPT. SALEM, OREGON

Yield gal/min	Drawdown	Drill stem at	Flowing Artesian	Time
6 G.P.M.	N/A	375'	<input checked="" type="checkbox"/>	1 hr.

Temperature of water 54° 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 Marion Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 9 N or S Range 3 E or W. WM.  
Section 2 1/4 1/4  
Tax Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block 400 Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) Enchanted Way

(10) STATIC WATER LEVEL:  
200' ft. below land surface. Date 5-28-98  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:  
Depth at which water was first found 39'

From	To	Estimated Flow Rate	SW
39'	48'	1/2 G.P.M.	35
226	254'	6 G.P.M.	200

(12) WELL LOG:  
Ground Elevation \_\_\_\_\_

Material	From	To	SWL
100 Sp. Clay, dark brown, w/some silt	0'	3'	
Stone brown	3'	15'	
Clay, light grey, w/some silt	15'	39'	
Stone grey	39'	48'	W.B.
BASALT, light grey w/brown	48'	67'	
STAINs heavily Fract.	67'	73'	
BASALT, dark grey, slightly Fract. w/dark green STAINs	73'	96'	
BASALT, light grey heavily Fract. w/brown STAINs	96'	118'	
BASALT, Grey/brown Fract. w/some claystone layers, yellow, some brown	118'	123'	
BASALT, dark grey, slightly Fract. w/dark green STAINs	123'	141'	
BASALT, Grey, Fract. w/light brown + Grey STAINs	141'	214'	

Date started 5-21-98 Completed 5-28-98

(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 Clint Johnson WWC Number 1507 Date 6-3-98

(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 Shirley WWC Number 1619 Date 6-3-98

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

Mari Pg. # 2 of 2  
 53350

WELL I.D.# L18078

(START CARD) # 106205

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

(1) OWNER: Well Number #4  
 Name Ted Porter  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

(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 \_\_\_\_\_ ft.  
 Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	

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	Material			
				Steel	Plastic	Welded	Threaded
Casing:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) \_\_\_\_\_

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Type	Material	Casing	Liner
					<input type="checkbox"/>	<input type="checkbox"/>
					<input 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

<input type="checkbox"/> Pump	<input type="checkbox"/> Bailer	<input type="checkbox"/> Air	<input type="checkbox"/> Flowing Artesian
Yield gal/min	Drawdown	Drill stem at	Time
			1 hr.

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 \_\_\_\_\_ Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
 Township \_\_\_\_\_ N or S Range \_\_\_\_\_ E or W. WM. \_\_\_\_\_  
 Section \_\_\_\_\_ 1/4 \_\_\_\_\_ 1/4 \_\_\_\_\_  
 Tax Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) \_\_\_\_\_

(10) STATIC WATER LEVEL:  
 200 ft. below land surface. Date 5-28-98  
 Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found \_\_\_\_\_

From	To	Estimated Flow Rate	SWL

(12) WELL LOG:  
 Ground Elevation \_\_\_\_\_

Material	From	To	SWL
BASALT, light Grey, less	214'		
FRACT.		226'	
BASALT, brown & light brown	226'		
Very Fract. w/ chytstone layer yellow		254'	w/b.
BASALT, light Grey, Fract. w/	254'		
DARK GREEN STAINS		273'	
BASALT, light brown & tan Fract.	273'		
w/ chytstone layers, yellow, some vesic		292'	
les slightly sandy			
BASALT, Grey, w/ dark	292'		
GREEN STAIN, med.		317'	
BASALT, Grey, some seams, med. hd	317'	349'	
BASALT, Grey, Fract. w/ brown seams	349'	357'	
BASALT, Grey, w/ brown seams, med.	357'	400'	
BASALT, brown, weather vesic.	400'		
w/ some chytstone			

Date started \_\_\_\_\_ Completed \_\_\_\_\_  
 (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 Clint Johansen WWC Number 1507 Date 6-3-98

(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 1619 Date 6-3-98