

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

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

YAMAHA  
51923

WELL I.D. # L L37/33  
START CARD # 125396

(1) OWNER: \_\_\_\_\_ Well Number \_\_\_\_\_  
 Name Puriponics  
 Address 11741 N.E. Hwy 240  
 City Damhill State Or Zip 97148

(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 200 ft.  
Explosives used ☐ Yes ☒ No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
10 5/8"	0	30	Bentonite	0	30	12
6"	30	220				

How was seal placed: Method ☒ A ☐ B ☐ C ☐ D ☐ E  
☐ Other Bentonite (Poured slowly)

Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Size of gravel \_\_\_\_\_

**(6) CASING/LINER:**

	Diameter	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: <b>30</b>	<b>4 1/2"</b>	<b>30</b>	<b>25</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<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: <b>4"</b>	<b>0</b>	<b>220</b>	<b>160</b>	<input checked="" type="checkbox"/>	<input checked="" 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:**

☒ Perforations      Method Electric Drill  
☐ Screens      Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tels/pipe size	Casing	Lines
180	220		150	5/8" Circular		<input type="checkbox"/>	<input checked="" type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<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 checked="" type="checkbox"/> Air	<input type="checkbox"/> Flowing <input type="checkbox"/> Artesian
Yield gal/min	Drawdown	Drill stem at	Time
5	Air Lift	220	1 hr.

Temperature of water 51° 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 Garnhill Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 35 N or S Range 3W E or W. WM.  
Section 6 SE 1/4 SW 1/4  
Tax Lot 3306 for 1100 Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) SAME

**(10) STATIC WATER LEVEL:**

(20) 72 ft. below land surface. Date 8/11/99  
 Artesian pressure lb. per square inch. Date \_\_\_\_\_

**(11) WATER BEARING ZONES:**

Depth at which water was first found 84 3 G.P.M.

From	To	Estimated Flow Rate	SWL
84	86	3	72
147	149	2	

**(12) WELL LOG:**

Ground Elevation 4990x 500

[illegible]

Date started 10/8/99 Completed 10/11/99  
(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 Not Appl. WWC Number \_\_\_\_\_ 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.

Signed Randall T. Wiley WWC Number 795  
Date 10/12

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

YAMH  
51822

WELL I.D.# L37124

(START CARD) # 125384

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

(1) OWNER:

Well Number \_\_\_\_\_

Name Puriponics  
Address 11711 N.E. Hwy 240  
City Yamhill State Or. Zip 97148

(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 180 ft.  
Explosives used ☐ Yes ☒ No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE				SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds	
10 3/8"	0	49	Bentonite	0	49	20 Sacks	
10 3/8"	49	67	Cement	49	67	8 Sacks	
6"	67	180					

How was seal placed: Method ☐ A ☐ B ☒ C ☐ D ☐ E  
☒ Other Bentonite placed top 10 minutes, Compacted  
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"	2	67	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:	4"	4	180	160	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

(7) PERFORATIONS/SCREENS:

<input checked="" type="checkbox"/> Perforations	Method	Electric Drill				
<input type="checkbox"/> Screens	Type	3/8" circular drilled holes				
From	To	Slot size	Number	Drill pipe size	Casing	Liner
140	180		140	3/8" circular	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				drilled holes	<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 checked="" type="checkbox"/> Air	<input type="checkbox"/> Flowing
Yield gal/min	Drawdown	Drill stem at	Time
75		180	2 hr.

Temperature of water 51° 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 Yamhill Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 35 N or S Range 3W E or W. WM.  
Section 6 NE 1/4 SW 1/4  
Tax Lot 3300 Block 1100 Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) SOME

(10) STATIC WATER LEVEL:

43 ft. below land surface. Date Oct. 8 99  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:

From	To	Estimated Flow Rate	SWL
95	97	2.5 gpm	
97	100	5.6 gpm	
120	125	18 gpm	
140	142	18 gpm	
155	165	40 gpm	

(12) WELL LOG:

Ground Elevation Approx 400'

Material	From	To	SWL
Topsoil	0	3	
Brown clay	3	18	
Brownish yellow clay	18	52	
Yellow decomposed clay	52	57	
Medium Heavy Blue & Grey Sandstone with unstable layers	57	180	

RECEIVED

OCT 21 1999

WATER RESOURCES DEPT.  
SALEM, OREGON

Date started 10/6/99 Completed 10/8/99

(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 Not App! WWC Number \_\_\_\_\_ 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.

Signed [Signature] WWC Number 268 Date Oct 8, 99