

R. J. Strasser Drilling Co.8110 S. E. Sunset Lane
Portland, Oregon 97206

December 8, 1980

RECEIVED
DEC 11 1980
WATER RESOURCES DEPT
SALEM, OREGON

Log of 150th Ave. Well

brown clay	0 - 5
sand, gravel and cobbles	5 - 20
cemented gravel	20 - 75
sand, gravel, and silt	75 - 103
clay and gravel	103 - 125
grey, green, and black clay	125 - 146
sand, gravel and clay	146 - 178
black sandstone	178 - 227
sand and gravel with clay layers	227 - 289
green and brown clay	289 - 318
silt and gravel	318 - 325
grey sandy clay	325 - 341
sand, gravel, and clay	341 - 350
sand and gravel	350 - 361
sand and gravel, cemented layers	361 - 410
cemented gravel	410 - 434
sand, gravel and clay	434 - 438
sand and gravel	438 - 453
silt, sand, and gravel	453 - 457
sand and gravel	457 - 463
slightly cemented gravel	463 - 505

WATER WELL REPORT
STATE OF OREGON

MULT
001276

State Well No. 1N/3E-2000
State Permit No. artesian

(1) OWNER:

Name ROCKWOOD WATER DISTRICT
Address 18302 SE STARK ST.
City PORTLAND State ORE.

(2) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandon
If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

Rotary Air Driven Domestic Industrial Municipal
Rotary Mud Dug Irrigation Test Well Other
 Bored Thermal Withdrawal ReInjection

(4) PROPOSED USE (check):

Steel Plastic
Threaded Welded

(5) CASING INSTALLED:

1/6" Diam. from 13 ft. to 230 ft. Gauge 375
10" Diam. from 212 ft. to 232 ft. Gauge 250
10" Diam. from 232 ft. to 262 ft. Gauge 262

LINER INSTALLED:

10" Diam. from 290 ft. to 465 ft. Gauge 475-490

(6) PERFORATIONS:

Perforated? Yes No
Type of perforator used _____
Size of perforations _____ in. by _____ in.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.

(7) SCREENS:

Well screen installed? Yes No
Manufacturer's Name UOP JOHNSON 132 70250
Type STAINLESS STEEL 28 Model No. 290
Diam. 10 Slot Size 50 Set from 405 ft. to 435 ft.
Diam. 10 Slot Size 50 Set from 445 ft. to 475 ft.

(8) WELL TESTS:

Drawdown is amount water level is lowered below static level
Was a pump test made? Yes No If yes, by whom? STRASSER
1400 gal./min. with 174 ft. drawdown after 24 hrs.
Air test _____ gal./min. with drill stem at _____ ft. _____ hrs.
Bailer test _____ gal./min. with _____ ft. drawdown after _____ hrs.
Artesian flow 60 g.p.m.
Temperature of water 57° Depth artesian flow encountered _____ ft.

(9) CONSTRUCTION:

Special standards: Yes No
Well seal—Material used CEMENT GROUT
Well sealed from land surface to 115 ft.
Diameter of well bore to bottom of seal 20 in.
Diameter of well bore below seal 16 in.
Number of sacks of cement used in well seal 152 sacks
How was cement grout placed? GROUT PUMPED IN
W. HILIE CASING WAS REMOVED
Was pump installed? _____ Type _____ HP _____ Depth _____ ft.
Was a drive shoe used? Yes No Plugs _____ Size: location _____ ft.
Did any strata contain unusable water? Yes No
Type of Water? _____ depth of strata _____
Method of sealing strata off _____
Was well gravel packed? Yes No Size of gravel: COARSE SAND
Gravel placed from 232 ft. to 490 ft.

(10) LOCATION OF WELL:

County MULTNOMAH Driller's well number 5575
SW 1/4 SW 1/4 Section 20 T. N R. 3E W.M.
Tax Lot # _____ Lot _____ Blk _____ Subdivision _____
Address at well location: _____

(11) WATER LEVEL: Completed well.

Depth at which water was first found 232 ft.
Static level _____ ft. below land surface. Date _____
Artesian pressure 1 lbs. per square inch. Date 5/19/81

(12) WELL LOG:

Diameter of well below casing _____
Depth drilled 523 ft. Depth of completed well 490 ft.
Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level and indicate principal water-bearing strata.

MATERIAL	From	To	SWL
SEE ATTACHED SHEET			
RECEIVED			
MAR 07 2006			
WATER RESOURCES DEPT SALEM, OREGON			
RECEIVED			
JUN 16 1981			
WATER RESOURCES DEPT SALEM, OREGON			

Work started JAN 13 19 81 Completed MAY 15 19 81
Date well drilling machine moved off of well MAY 15 19 81

Drilling Machine Operator's Certification:

This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.
[Signed] Benny Johnson Date 6-18, 19 81
(Drilling Machine Operator)
Drilling Machine Operator's License No. _____

Water Well Contractor's Certification:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Name R.J. STRASSER DRILLING CO.
(Person, firm or corporation) (Type or print)
Address 810 SE JOUSET LANE PORTLAND ORE
[Signed] Robert L. Thaxton
(Water Well Contractor)
Contractor's License No. 10 Date JUNE 15, 19 81

NOTICE TO WATER WELL CONTRACTOR
The original and first copy of this report
are to be filed with the

WATER RESOURCES DEPARTMENT,
SALEM, OREGON 97310
within 30 days from the date of well completion.

SP-12658-890

10554

Phone: 771-2355

R. J. Strasser Drilling Co.

8110 S. E. Sunset Lane
Portland, Oregon 97206

11/26 0125
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JUN 16 1981

WATER RESOURCES DEPT
SALEM, OREGON

Rockwood 185th Well No. 2

Brown silty clay	0-9
Silt, clay and large gravel	9-110
Gray clay	110-146
Dark brown clay	146-151
Gray clay	151-155
Green clay and gravel	155-169
Gray clay	169-183
Cemented gravel	183-189
Black sandstone	189-228
Sand and gravel clay seams	228-290
Green sticky clay	290-303
Gray clay	303-317
Green sandy clay	317-330
Gray clay	330-333
Gray sticky clay	333-348
Gray silty clay	348-359
Sand, gravel and clay	359-415
Cemented gravel	415-420
Loose gravel	420-450
Waterbearing gravel	450-465
Sand, gravel and clay	465-495
Cemented gravel	495-502
Silt and clay	502-523

Oregon Water Resources Department
PERMIT CONDITION WATER-LEVEL REPORTING FORM

Well Owner:

Name: Rockwood Water People's Utility District
Address: 19601 NE Halsey Blvd.
City: Portland State: OR Zip: 97230
Phone: (503) 665-4179 Fax: (503) 667-5108
RE: Required Water-Level Report for Well(s) on Permit: G-6639 Certificate: 83629

Our records indicate that you are the holder of a ground water permit that requires that you periodically measure and report static water levels in your well(s). If you are no longer the holder of this permit or no longer have an interest in it, please contact our department. **Consult your permit to determine the required times for measuring and reporting, as well as any requirements regarding who may make the measurements.** We recommend that you keep a copy of all measurement reports for your records. All measurements should be made to at least the nearest tenth of a foot or to the nearest inch (e.g. 10.2 feet or 10 feet 3 inches).

MEASUREMENT REPORT
(Complete one form for each well)

Well Identification (provide as much of the following information as possible):

Original Owner of Well (owner name on well log): Rockwood Water PUD
Owner's Well Name or Number (if any): Cascade #3
Well ID (number on tag attached to well casing, if present): L56125
Well Log Startcard Number (if listed on well log): 154597
Well Depth: 665.00 Casing Diameter: 16.00 inches
Date Drilled: 06/12/2003 Driller: Geo-Tech Exploration

When did water use begin under this permit from this well? Date: Month/YR. 05/01/2005

Show all water rights listing this well:

Application Number(s): G-7217
Permit Number(s): G-6639
Certificate Number(s): 83629

Date of measurement: 03/05/2008

Description of measuring point (e.g. 3/4 inch access port in sanitary seal): 1 inch access port on top of well cap

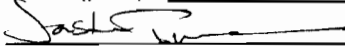
Static water level below measuring point: 187.63 feet, or airline pressure _____ psi
Measuring point distance above land surface: 1.42 feet, or airline length _____ feet
Static Water Level below land surface: 186.21 feet
Shut-in pressure (if a flowing artesian well): _____ psi

Method of measurement: E-tape Airline Other (specify)
Water-level status when measured: Static Pumping Recovering Flowing
Length of time well was idle before measurement: 5 days

Calculations / Comments (show all work): _____

I hereby certify that, to the best of my ability, the information on this report is accurate and, at the time of the measurement representative of the static water level in the aquifer.

Person making measurement (print): Justin Iverson

Signature of measurer: 

Company: Golder Associates, Inc.

License number (CWRE, RG, WWC, PE, CONS. BOARD #): 77690WRE, G2045

Daytime phone number: (503) 607-1820 Email address: jiverson@golder.com

If you have questions about this notice, please call the Measurement & Reporting Section of the Department at 503-986-0834 or 503-986-0831. Return this form to: 725 Summer St NE, Suite A; Salem, OR 97301-1271.

Additional forms can be obtained from our web site at: <http://www.wrd.state.or.us>

OWRD 7/20/2004 GW/RCK

RECEIVED

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SALEM, OREGON

Oregon Water Resources Department
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MEASUREMENT REPORT
(Complete one form for each well)

Well Identification (provide as much of the following information as possible):
Original Owner of Well (owner name on well log): Rockwood Water PUD
Owner's Well Name or Number (if any): Cascade #4
Well ID (number on tag attached to well casing, if present): L68016
Well Log Startcard Number (if listed on well log): 160370
Well Depth: 625.00 Casing Diameter: 20.00 inches
Date Drilled: 01/20/2004 Driller: Geo-Tech Exploration

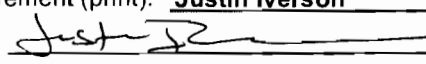
When did water use begin under this permit from this well? Date: Month/YR. 05/01/2005
Show all water rights listing this well:
Application Number(s): G-7217
Permit Number(s): G-6639
Certificate Number(s): 83629

Date of measurement: 03/05/2008
Description of measuring point (e.g. 3/4 inch access port in sanitary seal): 1 inch access port in top of well cap

Static water level below measuring point: 187.51 feet, or airline pressure _____ psi
Measuring point distance above land surface: 1.39 feet, or airline length _____ feet
Static Water Level below land surface: 186.12 feet
Shut-in pressure (if a flowing artesian well): _____ psi

Method of measurement: E-tape Airline Other (specify)
Water-level status when measured: Static Pumping Recovering Flowing
Length of time well was idle before measurement: 5 days

Calculations / Comments (show all work): _____

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