

NOTICE TO WATER WELL CONTRACTOR

The original and first copy of this report are to be filed with the

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OCT 11 1966

WATER WELL REPORT

7667  
MARK  
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24 A

STATE ENGINEER, SALEM, OREGON 97310  
within 30 days from the date of well completion.

STATE OF OREGON  
(Please type or print)  
S. W. ORISON

State Well No. 7/2w-24A

State Permit No. G-4689

(1) OWNER:

Name Harriet A. Spady  
Address 9460 Sunnyview Rd. N.E. Salem, Ore.

(2) LOCATION OF WELL:

County Madras Driller's well number  
1/4 Section 15 T. 7.5 R. 2.2 W.M.  
Bearing and distance from section or subdivision corner

(3) TYPE OF WORK (check):

Well  Deepening  Reconditioning  Abandon   
Addendum, describe material and procedure in Item 13.

(4) PROPOSED USE (check):

Domestic  Industrial  Municipal  Irrigation  Test Well  Other

(5) TYPE OF WELL:

Rotary  Driven  Cable  Jetted  Dug  Bored

(6) CASING INSTALLED:

Threaded  Welded

8" Diam. from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Gage \_\_\_\_\_  
8" Diam. from 41 ft. to 54 ft. Gage 250  
" Diam. from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Gage \_\_\_\_\_

(7) 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.  
perforations from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
perforations from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

(8) SCREENS:

Well screen installed?  Yes  No

Manufacturer's Name \_\_\_\_\_ Model No. \_\_\_\_\_  
Slot size \_\_\_\_\_ Set from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
Diam. \_\_\_\_\_ Slot size \_\_\_\_\_ Set from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

(9) CONSTRUCTION:

Well seal—Material used in seal Rock Cuttings & Bentonite  
Depth of seal 53 ft. Was a packer used? NR  
Diameter of well bore to bottom of seal 12 in.  
Were any loose strata cemented off?  Yes  No Depth \_\_\_\_\_  
Was a drive shoe used?  Yes  No  
Was well gravel packed?  Yes  No Size of gravel: \_\_\_\_\_  
Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
Did any strata contain unusable water?  Yes  No  
Type of water? \_\_\_\_\_ depth of strata \_\_\_\_\_  
Method of sealing strata off \_\_\_\_\_

(10) WATER LEVELS:

Static level 19 ft. below land surface Date 9-29-66  
Artesian pressure \_\_\_\_\_ lbs. per square inch Date \_\_\_\_\_

(11) WELL TESTS:

Drawdown is amount water level is lowered below static level

Was a pump test made?  Yes  No If yes, by whom? Miller & West  
Yield: 80 gal./min. with 11 ft. drawdown after 1 hrs.  
" 350 " 56 " 2 "  
" 410 " 86 " 3 "  
Bailer test gal./min. with ft. drawdown after hrs.  
Artesian flow g.p.m. Date

Temperature of water \_\_\_\_\_ Was a chemical analysis made?  Yes  No

(12) WELL LOG:

Diameter of well below casing \_\_\_\_\_

Depth drilled 201 ft. Depth of completed well 201 ft.  
Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.

MATERIAL	FROM	TO
BROWN - CLAY	0	30
" CEMENTED	30	38
GRAVEL		
LOOSE COARSE "	38	41
PARTLY DECOMPOSED ROCK	41	43
GRAY - HARD BASALT	43	46
BROWN - DECOMPOSED	46	50
BASALT		
BLACK - BASALT HARD	50	55
+ SOFT LAYERS		
" - BASALT WITH	55	160
LAYERS OF CLAY		
SPINE		
BLACK - SPANNY BASALT	160	201

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WATER RESOURCES DEPT  
SALEM, OREGON

Work started 9-13-66 19 Completed 9-29-66 19  
Date well drilling machine moved off of well 11-11-11 19

(13) PUMP:

Manufacturer's Name \_\_\_\_\_  
Type: \_\_\_\_\_ H.P. \_\_\_\_\_

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 Miller & West  
(Person, firm or corporation) (Type or print)  
Address 5545 Joseph St. S.E. Salem.

Drilling Machine Operator's License No. \_\_\_\_\_

[Signed] Harriet A. Spady  
(Water Well Contractor)

Contractor's License No. 37 Date 9-29-66, 19\_\_\_\_

(USE ADDITIONAL SHEETS IF NECESSARY)

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