NOTICE TO WATER WELL CONTRACTOR  The original and first copy of this report are to be E E WATER WELL	DECEIVED L	. 4	:	•	
of this report are to be filed with the	OREGON IIIN 2 5 1071 Well No.	5/3	-51	ba	
JUNIO 13/1 STATE OF		-			
within 30 days from the 10te A	OVE this line) ENGINEER Permit No	)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
of well completion. SALEM OF OBORDE Write above this like EM. OREGON					
(1) OWNER:	(10) LOCATION OF WELL:				
(1) OWNER: Name B. W. Hood $(010663)$	County Claskags Driller's well nu	mber	_		
		R. 3E		W.M.	
Celter, Oregon 97017	Bearing and distance from section or subdivision corner				
(2) TYPE OF WORK (check):					
New Well □ Deepening Abandon □ Abandon □					
If abandonment, describe material and procedure in Item 12.	(11) WATER LEVEL: Completed well.				
(3) TYPE OF WELL: (4) PROPOSED USE (check):	Depth at which water was first found ft.				
Rotary Driven Domestic Industrial Municipal	The state of the s	Static level /2 ft. below land surface. Date 58/7/			
Cable Dug Bored Irrigation Test Well Other	Artesian pressure Ibs. per square inch. Date				
	At testait pressure				
CASING INSTALLED: Threaded   Welded	(12) WELL LOG: Diameter of well b	elow cas	ing	6	
6 " Diam. from 0 ft. to 133 ft. Gage • 250	Depth drilled 210 ft. Depth of completed well 205 ft.				
	Formation: Describe color, texture, grain size and structure of materials;				
" Diam. from ft. to ft. Gage	and show thickness and nature of each stratur with at least one entry for each change of format				
PERFORATIONS: Perforated? X Yes   No.	position of Static Water Level and indicate princ	cipal wat	er-bearin	g strata.	
Type of perforator used Mills knife	MATERIAL	From	то	SWL	
Size of perforations 1/2 in. by 2 in.	Set ever 8 inek well eril	lcā		12	
32 perforations from 110 ft. to 125 ft.	in 1959 to 133 ft.				
perforations fromft., toft.	Reek , black, kard	133	145	12	
perforations fromft. toft,	Claystene, blue	145	150		
(7) SCREENS: Well screen installed?   Yes A No	Mask, basit	150	157	_12_	
(7) SCREENS: Well screen installed \(\sigma\) Yes \(\frac{\bar{\text{N}}}{\text{N}}\) No Manufacturer's Name	Claystene steaks of	157	179		
TypeModel No	Grev shale	179	200		
Diam. Slot size Sef from ft. to ft.	Breken hard green shale	200	205	12	
Diam. Slot size Set from ft. to ft.	Grey hard shale	205	210		
(8) WELL TESTS: Drawdown is amount water-level is					
TOWERED DESCRIPTION OF THE PROPERTY OF THE PRO				-	
Was a pump test made? ☐ Yes ☐ No If yes, by whom? Owner					
Yield: 100 gal./min. with 22 ft. drawdown after 29 hrs.					
" " " " " " " " " " " " " " " " " " " "	17			<del></del>	
" " " " " " " " " " " " " " " " " " " "	T T			-	
Bailer test gal./min. with ft. drawdown after hrs.	A company of the comp				
Artesian flow g.p.m.			<del>,</del> _		
temperature of water 52 Depth artesian flow encountered ft.	Work started 5/25 19 71 Complete	ed 5 /	/31	19 71	
(9) CONSTRUCTION:	Date well drilling machine moved off of well	5 🗗	<u> </u>	19 71	
	Drilling Machine Operator's Certification:				
Well seal—Material used	This well was constructed under my	direct	super	vision.	
Diameter of well bore to bottom of sealin.	Materials used and information reported best knowledge and belief.	above a	are urue	e to my	
Diameter of well bore below sealin.	[Signed] & Mediclary	Date	115	., 197.1	
Number of sacks of cement used in well seal sacks	(Drilling Machine Operator)		86		
Number of sacks of bentonite used in well sealsacks	Drilling Machine Operator's License No.				
Brand name of bentonite	Water Well Contractor's Certification:		•		
Number of pounds of bentonite per 100 relicons	This well was drilled under my jurisdiction and this report is				
of water	true to the best of my knowledge and belief.				
Did any strata contain unusable water? Yes No	Name C. G. Westerberg (Type or print)				
	Address Rt. 1, Bax 151, Muline, Oregon				
Type of water and the same and	0 9 %, +1				
Method of sealing strata off  Was well gravel packed?  Yes No Size of gravel:	[Signed] Control (Signed) (Sig	actor)_			
	Contractor's License No Date	9/15	)	71	
Gravel placed from ft. to tt.				, 19	
- COR ADDITIONAL SH	LEELD IF MECESOARI)		SI	P*45656-119	