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W-17132

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

WATER RESOURCES DEPT.
SALEM, OREGON 97331 (START CARD) #

(1) OWNER: Pat O-meuka Well Number: #6
Name Spring Water Golf Course
Address 25230 Swallens Rd
City Estacada State Ore Zip 97023

(9) LOCATION OF WELL by legal description:
County Clack Latitude _____ Longitude _____
Township 4S N or S, Range 4E E or W, WM.
Section 5 1/4 _____ 1/4 _____
Tax Lot 02802 Block _____ Subdivision _____
Street Address of Well (or nearest address) 25230 Swallens Rd

(2) TYPE OF WORK:
 New Well Deepen Recondition Abandon

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable
 Other _____

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Other _____

(10) STATIC WATER LEVEL:
147 ft. below land surface. Date 2-25-90
Artesian pressure _____ lb. per square inch. Date _____

(5) BORE HOLE CONSTRUCTION:
Special construction approval Yes No Depth of Completed Well 283 ft.
Explosives used Yes No Type _____ Amount _____

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

Diameter		From		To		Material		SEAL		Amount	
10"	0'	90'	Cement	0'	18'	9	sacks				
8"	90'	220'	Cement	70'	77'	4	sacks				
6"	220'	310'									

From	To	Estimated Flow Rate	SWL
29'	30'	106 GPM	10
208'	220'	18 GPM	147

How was seal placed: Method A B C D E
 Other _____
Backfill placed from 18 ft. to 70 ft. Material Pea Gravel
Gravel placed from 77 ft. to 220 ft. Size of gravel Pea Gravel

(12) WELL LOG: Ground elevation 1040'

(6) CASING/LINER:
Diameter 6" From 71' To 228' Gauge .250" Steel Plastic Welded Threaded
Liner: _____

Material	From	To	SWL
Top Soil	0	1	
Clay Brown	1	10	
Decomposed Rock	10	57	10
Clay Lt. Brown	57	60	
Decomposed Rock	60	67	
Clay Dark Brown	67	72	
Lava Black	72	108	
Lava Red	108	113	
Lava Black	113	164	
Clay Brown	164	171	
Shale Brown	171	176	
Clay Brown sandy	176	187	
Shale Gray	187	194	
Shale Brown	194	199	
Clay Brown sandy	199	208	
Sand multi-colored with Bag	208	220	147
Shale Dark Gray	220	239	
Clay Blue	238	265	
Shale Dark Gray	265	270	
Clay Blue	270	310	

(7) PERFORATIONS/SCREENS:
 Perforations Method Torch
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
128	228	1/8x6	105	6"		<input checked="" type="checkbox"/>	<input type="checkbox"/>

Date started 1-9-90 Completed 2-25-90

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min 18 Drawdown 147-240 Drill stem at 24 Time 1 hr.

(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 well construction standards. Materials used and information reported above are true to my best knowledge and belief.
Signed Thomas Youngberg WWC Number 1512 Date 3-20-90

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: _____

(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 well construction standards. This report is true to the best of my knowledge and belief.
Signed W.O. Youngberg WWC Number 257 Date 3-20-90