

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

14C
12303

SEP 20 1991

25/3E-140c
 307970c

(1) **OWNER:** Well Number: _____
 Name The Salvation Army
 Address 24751 SE, Hwy 224
 City Boring State OR Zip 97009

(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 _____

(5) **BORE HOLE CONSTRUCTION:**
 Special Construction approval Yes No Depth of Completed Well 160 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE		SEAL		Amount sacks or pounds
Diameter	From To	Material	From To	
14	0 50	Cement	0 50	79 Sack
10	50 500			
8	500 660			

How was seal placed: Method A B C D E
 Other _____
 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
10	+1	260	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8	0	605		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Liner: _____
 Final location of sheets) 10-260 8-605

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

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<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**
 Pump Bailer Air Flowing Artesian
 Yield gal/min 60 Drawdown _____ Drill stem at 640 Time 4 hr.

Temperature of water 55 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 CLATSOP Latitude _____ Longitude _____
 Township 2 N or S, Range 3E E or W, WM.
 Section 14C SW 1/4 NW 1/4
 Tax Lot 300 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) 24751 SE, Hwy 224, Boring OR 97009

(10) **STATIC WATER LEVEL:**
140 ft. below land surface. Date 8-20-91
 Artesian pressure _____ lb. per square inch. Date _____

(11) **WATER BEARING ZONES:**
 Depth at which water was first found 160

From	To	Estimated Flow Rate	SWL
160	170	20-30	25
615	640	60 Plus	140

(12) **WELL LOG:** Ground elevation _____

Material	From	To	SWL
TOP SOIL	0	2	
Red CLAY	2	8	
Large GRAVEL	8	14	
Blue CLAY	14	160	
SAND, WATER, CLAY	160	170	25
Blue Shell	170	560	
SOFT BROWN ROCK	560	590	
HARD BLACK BASALTS	590	660	140
Under Reamed 8" Hole			
To 10" From 590' TO 605' Place 20 Sack Cement Grout.			
Water meter on job.			

Date started 7-10-91 Completed 8-20-91

(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 _____ 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 well construction standards. This report is true to the best of my knowledge and belief.
 Signed Ted W. Pullman WWC Number 666 Date 8-20-91