

NOTICE TO WATER WELL CONTRACTOR

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

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

CLAC 12424 WATER WELL REPORT

CLAC 012424

RECEIVED
STATE ENGINEER

STATE OF OREGON

(Please type or print) (Do not write above this line)

State Well No. 4/1-22 A

State Permit No. _____

G-4266

(1) OWNER:

Name Russell Stillwagon
Address P O Box 121 Canby, Oregon

(2) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandon

If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

Rotary Driven
Cable Jetted
Dug Bored

(4) PROPOSED USE (check):

Domestic Industrial Municipal
Irrigation Test Well Other

(5) CASING INSTALLED:

Threaded Welded
8" Diam. from 0 ft. to 126'6" ft. Gage 14"
" Diam. from _____ ft. to _____ ft. Gage _____
" Diam. from _____ ft. to _____ ft. Gage _____

(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.
_____ perforations from _____ ft. to _____ ft.

(7) SCREENS:

Well screen installed? Yes No

Manufacturer's Name _____
Type _____ Model No. _____
Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.
Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.

(8) WATER LEVEL: Completed well.

Static level 70 ft. below land surface Date 2/27/68
Artesian pressure _____ lbs. per square inch Date _____

(9) WELL TESTS:

Drawdown is amount water level is lowered below static level

Was a pump test made? Yes No If yes, by whom? driller

60 gal./min. with 32 ft. drawdown after 4 hrs.
75 " " 45 " " 4 "

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

(10) CONSTRUCTION:

Well seal—Material used Puddled mud
Depth of seal _____ 40 ft.
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
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: _____
Gravel placed from _____ ft. to _____ ft.

(11) LOCATION OF WELL:

County Clackamug Driller's well number _____
1/4 1/4 Section 22 T. 4S R. 1E W.M.

Bearing and distance from section or subdivision corner _____

(12) WELL LOG:

Diameter of well below casing 8

Depth drilled 142 ft. Depth of completed well 142 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 as drilling proceeds. Note drilling rates.

| Top soil MATERIAL | From | To | SWL |
|---|------|-----|-----|
| Brown clay | 0 | 23 | |
| Cement gravel | 23 | 35 | |
| Brown clay & fine gravel | 35 | 65 | |
| Cement gravel | 65 | 70 | |
| White clay & fine gravel | 70 | 78 | |
| Boulders, gravel, & brown sand mixed (water bearing 10 gpm) | 78 | 84 | |
| Brown clay | 84 | 95 | |
| Brown sand | 95 | 105 | |
| Brown clay | 105 | 108 | |
| Blue clay | 108 | 128 | |
| Coarse black sand | 128 | 142 | |

Work started Feb 14 19 68 Completed Feb 27 19 68
Date well drilling machine moved off of well Feb 27 19 68

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] John T. Miller Date Feb 27, 19.68
(Drilling Machine Operator)

Drilling Machine Operator's License No. 500

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 John Truman Miller
(Person, firm or corporation) (Type or print)

Address P O Box 42 Hubbard, Oregon

[Signed] John T. Miller
(Water Well Contractor)

Contractor's License No. 277 Date February 27, 19.68



Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem Oregon 97301
(503) 986-0900
www.wrd.state.or.us

Application for Well ID Number

RECEIVED

OCT 11 2010

WATER RESOURCES DEPT
SALEM, OREGON

Do not complete if the well already has a Well I.D. Number.

I. OWNER INFORMATION

Current Owner Name (please print): Carlos Montes
Mailing Address: 9858 S Madisburg Rd
City: Canby State: OR Zip: 97013
Mailing Address (to send Well I.D.): Same
City: State: Zip:

II. WELL INFORMATION (Do not complete this section if the well report is attached)

Township: 4S (North/South) Range: 1E (East/West) Section: 22
Tax Lot: 00101 County: Clatsop 1/4 1/4
Street Address of Well: 9858 S Madisburg Rd City: Canby
Owner at time the well was constructed, (if known):
If the property had a different street address in the past:

III. GENERAL WELL INFORMATION (Do not complete this section if the well report is attached)

Use of Well (domestic, irrigation, commercial, industrial, monitoring): domestic
Date Well Constructed: Total Well Depth: Casing Diameter:
Other Information:

SUBMITTED BY (please print): Carlos Montes
PHONE: 503.680.9506 FAX: 503.266.4204

Send application to Oregon Water Resources Department; 725 Summer St NE, Suite A; Salem, Oregon 97301-1266; fax (503) 986-0902. Applications are processed and Well I.D. Numbers are mailed every Wednesday.

For Official Use Only by the Oregon Water Resources Department:
Received Date: Well Log Number: CLAC 12424 Well Identification #: 105438