CLAC 012861

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WATER RESOURCES DEPT
SALEM, OREGON

4S/1E-2aC
Dep.

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

(1) OWNER:
Owner's Well Number: 284

Name: Marlowe J Buchanan
Address: 2701 SW Greentree Rd
City: Lake Oswego State: Or Zip: 97034

(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:
Depth of Completed Well ____ ft.
Special Standards date of approval ____

HOLE Diameter	From	To	SEAL Material	From	To	Amount sacks or pounds

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
Casing:	6"	+1	132	250	☒	☐	☒	☐
	5 9/16	120	180	188	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐

Final location of shoe(s) ~~180~~ 132

(7) PERFORATIONS/SCREENS:
☒ Perforations Method Torch
☐ Screens Type ____ Material ____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						☐	☐
134	137	¼X8	6			☐	☒
160	178	¼X8	10			☐	☒
						☐	☐
						☐	☐
						☐	☐

(8) WELL TESTS: Minimum testing time is 1 hour
☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal/min	Pumping level	Drill stem at	Time
			½ hr
80		150'	1 hr
80		150'	4 hrs

Temperature of water 54 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 Clack. Latitude ____ ' " Longitude ____ ' "
Township 4S N or S, Range 1E E or W, WM.
Section 2 NE ¼ SW ¼
Tax Lot ____ Lot ____ Block ____ Subdivision ____
Street Address of Well (or nearest address) 24702 S Sparrow Ct
Canby, Or 97013

(10) STATIC WATER LEVEL:
60 ft. below land surface. Date 6/12/86
Artesian pressure ____ lb. per square inch. Date ____

(11) WELL LOG:
Ground elevation ____

Material	From	To	WB?	SWL
Sand, gravel, compact	100	123	yes	53'
Clay, blue	123	134		
Sand, gravel, compact	134	137	yes	60'
Clay, blue	137	160		
Sand, gravel, compact	160	178	yes	60'
Clay, blue	178	180		
WELL DEEPENED				
8" CASING WAS NOT				
MOVED OR ALTERED				

Date started June 7, 1986 Completed June 12, 1986

(unbonded) Water Well Constructor Certification:
I constructed this well in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.

Signed ____ Date ____

(bonded) Water Well Constructor Certification:
I accept responsibility for construction of this well and its compliance with all Oregon water well standards. This report is true to the best of my knowledge and belief.

Signed George J. Wainwright Date June 12, 198

Company ____ Co. Job No. ____

9809C 10/85