NOTICE TO WATER WELL CONTRACTOR The original and first copy of this report are to be filed with the

WATER RESOURCES DEPARTMENT, SALEM, OREGON 97310 within 30 days from the date of well completion.

CLAC 13140 WATER WELL REPORT

STATE OF OREGON

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

CLAC State Well No. 43/16-49

(1) OWNER:	(10) LOCATION OF WELL:	. r	240-	-79
NamePat Richardson	County Clackamas Driller's well nu	7 77		
Address 10301 S. Kraxberger Rd.	4 4 Section 1.	л.		<u>w.m.</u>
Canby, Oregon 97013	Bearing and distance from section or subdivision	on corner		
(2) TYPE OF WORK (check):				-
New Well ☐ Deepening ☐ Reconditioning ☐ Abandon ☐	<u>-</u>	<u>,,, , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		
If abandonment, describe material and procedure in Item 12.	(11) WATER LEVEL: Completed w	ell.		
(3) TYPE OF WELL: (4) PROPOSED USE (check):	Depth at which water was first found 48			11-79
Rotary XX Driven Domestic Industrial Municipal	Static level 60 ft. below land s	urface. I	Date 0-	<u> </u>
Cable	Artesian pressure lbs. per squar	e inch. I	Date	
CASING INSTALLED: Threaded □ Welded □ 8 " Diam. from 0 ft. to 226 ft. Gage 250 " Diam. from ft. to 1 ft. Gage 1 " Diam. from ft. to 1 ft. Gage 1	(12) WELL LOG: Diameter of well to Depth drilled 240 ft. Depth of complete Formation: Describe color, texture, grain size and show thickness and nature of each stratu	eted well and struct m and ac	ing	ft. naterials; netrated,
	with at least one entry for each change of forma position of Static Water Level and indicate prin	tion. Repo	ort each c	hange in
PERFORATIONS: Perforated? Tyes XX No.		From	то	SWL
Type of perforator used	Top Soil	O	3	
Size of perforations in. by in.	Brown clay	3	46	
perforations from	Brown clay w/ gravel	46	157	
perforations fromft. toft.	Blue clay sticky	157	182	
perforations from ft. to ft.	Sand black water gravel	182	190	
(7) SCREENS: Well screen installed? ☐ Yes X No	Blue clay	190	236	
Manufacturer's Name	Sandstone soft- water	226	240	
Type Model No.	Dariab College Doze College			
Diam. Slot size Set from ft. to ft.				
Diam Slot size Set from ft. to ft.				
(8) WELL TESTS: Drawdown is amount water level is lowered below static level	The second of th			
Was a pump test made? Yes Vo If yes, by whom?	(LIE'S - SOTO	ļ		
Yield: 150 gal./min. withtotalt. drawdown after 2 hrs.	Olivaria (Control of the Control of	_		
" - "		 		
" " "	E THE COURT OF THE PERSON OF T			
Bailer test gal./min. with ft. drawdown after hrs.	· · · · · · · · · · · · · · · · · · ·	 		
Data vos		 		
Artesian flow g.p.m.	Work started 6/8/79 19 Comple	ted 6/	11/79	19
mperature of water Depth artesian flow encountered ft.		,eu ,	· ·	··
(9) CONSTRUCTION: cement	Date well drilling machine moved off of well Drilling Machine Operator's Certification	:		19
Well sealed from land surface to	This well was constructed under my Materials used and information reported best knowledge and belief	direct labove	are true	e to my
Diameter of well bore below seal in.	[Signed] (Drilling Machine Operator)	Date 6		, 19
Number of sacks of cement used in well seal sacks How was cement grout placed? pressure grouted	Drilling Machine Operator's sicense No.	88	3	
	Water Well Contractor's Certification:			
	This well was drilled under my jurisc true to the best of my knowledge and be	liction a	nd this 1	report is
Was a drive shoe used? 🔀 Yes 🗆 No Plugs Size: location ft.	Name S & M Drilling			
Did any strata contain unusable water? 🗌 Yes 🛂 No	(Person, firm or corporation)	(T	ype or pri	
Type of water? depth of strata	Address 399 S E Walnut C	anby,	Ore.	9701
Method of sealing strata off	[Signed] //n////////	2	-	
Was well gravel packed? ☐ Yes ▼ No Size of gravel:	[Signed] (Water Well Con	tractor)	7 /70	
Charles placed from	Contractor's License No Date		L1/79	, 19

Received Date:

For Official Use Only:	
County Well Log ID #	Well Identification Tag #
LAC 13140 \	35995

WELL IDENTIFICATION APPLICATION FORM

BUYER CURRENT WELL OWNER:
Name: RoB and Borrie Sandtas.
Mailing Address: 10281 S. KRUX beigen Rd
City: State: Zip: Phone:
WELL LOCATION: (well # 2 an Mis Permit is) County: Clackomos Owner's Well Number: Agriculture #1
County: Clacko Mos Owner's Well Number: Agriculture #1
Township:
Tax Lot Number: Type of Well: water supply Aquially monitoring
Street Address of Well (if different from above):
WELL INFORMATION: (do not complete remainder of application if well log is available)
Start Card Number: Approx. Construction Date:
Well Constructor:?
Name of Owner at Time of Construction: <u>Richardsau</u>
Well Depth (in feet): Static Water Level (in feet): ?
Diameter of Exposed Well Casing (in inches):
Does this well have a formal water right associated with it? Yes: No:
If Yes: Application #: 6 13085 Permit #: 611905 Certificate #: 7.
Please Return Completed Form to: Lisa Juul Well Identification Program Oregon Water Resources Department RECEIVED
158 12th Street NE SEP 0 3 1999 Salem, OR 97310