

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

CLAC

015079

RECEIVED

MAY 18 1989

START CARD # 10673

(1) OWNER:

Name Butch Stetson Well Number: _____
 Address 9571 S. Wildcat Rd
 City Molalla State OR Zip 97038

(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 625 ft.
 Explosives used Type _____ Amount _____

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

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:					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Location of shoe(s) _____

PERFORATIONS/SCREENS:

Perforations Method _____
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
			1 hr.
300		625	4 hrs.

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: _____

(9) LOCATION OF WELL by legal description:

County CLATSOP Latitude _____ Longitude _____
 Township 6S Range 1S E or W, WM.
 Section 3 NW 1/4 SE 1/4
 Tax Lot _____ Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) same as mailing

(10) STATIC WATER LEVEL:

130 ft. below land surface. Date 5-6-89
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found N/A

From	To	Estimated Flow Rate	SWL
N/A			
NO ADDITIONAL ENCOUNTERED			

(12) WELL LOG:

Material	From	To	SWL
Basalt grey hard	510	555	
Rock green semi hard & lavender	555	625	

Date started 5-5-89 Completed 5-6-89

(unbonded) Water Well Constructor Certification:

I certify that the work I performed on the construction, alteration, or abandonment of this well during the construction dates reported above are true to my best knowledge and belief.

Signed Butch Stetson WWC Number 1358
 Date 5-12-89

(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 [Signature] WWC Number 723
 Date 5-11-89