

(1) OWNER: Well No. AMMEND
 Name DOROTHY AUTRY
 Address 1726 LAKE STREET
 City HUNTINGTON BECH St CA Zip 92648

(2) TYPE OF WORK: NEW WELL

(3) DRILL METHOD: ROTARY AIR

(4) PROPOSED USE: COMMUNITY

(5) BORE HOLE CONSTRUCTION:
 Special Construction Approval NO _____ Depth of Compl. Well 320 ft
 Explosives used NO _____ Type _____ Amount _____

HOLE			SEAL			
Diam.	From	To	Material	From	To	Amount
14	0	20	CEMENT	0	20	25 SACKS
12	20	50	CEMENT	20	50	25 SACKS
10	50	100	CEMENT	50	100	25 SACKS
8	100	220	1/6" 220-405	200	220	5 SACKS

Seal placement method C
 Backfill: from ___ ft to ___ ft Material _____
 Gravel: from ___ ft to ___ ft Size _____

(6) CASING/LINER:

	Diam.	From	To	Gauge	Material	Connection
Casing	8	+1	100	.250	STEEL	WELDED
	6	+1.5	305	.250	STEEL	WELDED
Liner						

Final Location of shoe(s) 100'/305' O.D.SYSTEM

(7) PERFORATIONS/SCREENS:
 Perf. Method _____
 Screens Type _____ Material _____

From	To	Slot Size	Number	Diam.	Tele/pipe Size	Casing/liner

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

Yield GPM	Draw-down	Drill stem at	Time
35		305	1 hr.
30		285	1 hr
25		265	1 hr

Temperature of water _____ Depth Artesian Flow Found _____
 Was water analysis done? NO By whom _____
 Reason for water not suitable for use _____
 Depth of strata _____

(9) LOCATION OF WELL by legal description:
 County CLACK Lat. ° ' " Long. ° ' "
 Township 3 S Range 2 E WM.
 Section 33 1/4 1/4
 Tax Lot Lot Block Subdivision
 Street Address of Well (or nearest Address)
 23421 HWY 213 SPACE #6 OREGON CITY, OR 97045

(10) STATIC WATER LEVEL:
 175 ft. below land surface. Date 11/16/87
 Artesian pressure _____ lb per square in. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found 70

From	To	Est Flow Rate	SWL
70	90	20 GPM	50
181	195	40-50 GPM	100
310	320	35 GPM	175
350	355	UNKNOWN	

(12) WELL LOG:

Material	Ground elevation		SWL
	From	To	
TOP SOIL	0	3	
RED CLAY	3	8	
BROWN CLAY	8	16	
DECOMPOSED BLACK ROCK	16	23	
BROWN CLAY	23	28	
BLACK BASALTS	28	60	
BROWN SHALE	60	80	50
BLACK BASALTS	80	129	
BROWN SHALE	129	163	
BLUE SHALE	163	184	
SANDSTONE	184	195	100
BLUE SHALE	195	230	
GRAY SHALE	230	269	
BLUE SHALE	269	310	
BLACK SAND W/B	310	325	175
BLUE SHALE	325	340	
SAND	340	345	

Date started 11/03/87 Completed 11/17/87

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 DEC 10 2001
 WATER RESOURCES DEPT.
 SALEM, OREGON

(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 water supply 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 water supply well construction standards. This report is true to the best of my knowledge and belief.
 Signed _____ WWC Number 616
 Date 11/17/87

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Seal placement method C
Backfill: from _____ ft to _____ ft Material _____
Gravel: from _____ ft to _____ ft Size _____

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	Diam.	From	To	Gauge	Material	Connection
Casing	8	+1	100	.250	STEEL	WELDED
	6	+1.5	305	.250	STEEL	WELDED

Liner _____

Final Location of shoe(s) 100'/305' O.D.SYSTEM

(7) PERFORATIONS/SCREENS:
[] Perf. Method _____
[] Screens Type _____ Material _____

From	To	Slot Size	Number	Diam.	Tele/pipe Size	Casing/liner
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

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

Yield GPM	Draw-down	Drill stem at	Time
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Was water analysis done? NO By whom _____
Reason for water not suitable for use _____
Depth of strata _____

(9) LOCATION OF WELL by legal description:
County CLACK Lat. ° ' " _____ Long. ° ' " _____
Township 3 S Range 2 E WM. _____
Section 33 1/4 1/4
Tax Lot _____ Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest Address)
23421 HWY 213 SPACE #6 OREGON CITY, OR 97045

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175 ft. below land surface. Date 11/16/87
Artesian pressure _____ lb per square in. Date _____

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From	To	Est Flow Rate	SWL
70	90	20 GPM	50
181	195	40-50 GPM	100
310	320	35 GPM	175
350	355	UNKNOWN	_____

(12) WELL LOG:

Material	Ground elevation		SWL
	From	To	
BLUE SHALE	345	350	
SAND	350	355	
BLUE SHALE	355	370	
SAND	370	375	
BLUE SHALE	375	405	
*CEMENT 200'-220' 5 SACKS			

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DEC 10 2001

WATER RESOURCES DEPT.
SALEM, OREGON

Date started 11/03/87 Completed 11/17/87

(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 water supply 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 water supply well construction standards. This report is true to the best of my knowledge and belief.

Signed *Ted M. Pulliam* WWC Number 616
Date 11/17/87

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CLAC 16276

35/2E-33

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

NOV 25 1987

(1) OWNER: Name Dorothy H, Autry Address 1726 Lake ST. City Huntington Beach State Cal Zip 92648

(2) TYPE OF WORK: [X] New Well [] Deepen [] Recondition [] Abandon

(3) DRILL METHOD: [X] Rotary Air [] Rotary Mud [] Cable [] Other

(4) PROPOSED USE: [X] Domestic [X] Community [] Industrial [] Irrigation [] Thermal [] Injection [] Other

(5) BORE HOLE CONSTRUCTION: Special Construction approval Yes No Depth of Completed Well 320 ft. Explosives used [] [X] Type Amount

Table with columns: HOLE Diameter, From, To, Material, SEAL From, To, Amount sacks of cement

How was seal placed: Method [] A [] B [X] C [] D [] E Backfill placed from ft. to ft. Material Gravel placed from ft. to ft. Size of gravel

(6) CASING/LINER: Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded

PERFORATIONS/SCREENS: [] Perforations Method [] Screens Type Material

Table for perforations with columns: From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner

(8) WELL TESTS: Minimum testing time is 1 hour. Table with columns: Yield gal/min, Drawdown, Drill stem at, Time

Temperature of water Depth Artesian Flow Found Was a water analysis done? Did any strata contain water not suitable for intended use? Salty Muddy Odor Colored Other

(9) LOCATION OF WELL by legal description: County CLACK Latitude Longitude Township 3S N or S, Range 2E E or W, WM. Section 33 Tax Lot Lot Block Subdivision Street Address of Well (or nearest address) 23421 Hwy 213 Space #6 Oregon City Ore 97045

(10) STATIC WATER LEVEL: 175 ft. below land surface. Date 11-16-87 Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES: Table with columns: From, To, Estimated Flow Rate, SWL

(12) WELL LOG: Table with columns: Material, From, To, SWL

Date started 11-3-87 Completed 11-17-87

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