

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

Start card no. 0234

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MAY 23 1988

35/3E-13aa

CLAC  
 16647

(1) OWNER: Well Number: 12-88  
 Name TWIN ISLAND COMMUNITY ASSN.  
 Address 28904 SE Woods Road  
 Eagle Creek, State Ore. Zip 97022

(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

BORE HOLE CONSTRUCTION:  
 Special Construction approval Yes No Depth of Completed Well 155 ft.  
 Yes No    
 Explosives used   Type Amount

HOLE		SEAL		Amount sacks or pounds
Diameter	From To	Material	From To	
8	30 155	Cement gr.	0 30	24 sacks

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:	8	+3	126	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:	6	115	155	250	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 126 ft.

(7) PERFORATIONS/SCREENS:

Perforations Method Saw  
 Screens Type Material

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
7	154	1/8	120			<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Pump  Bailor  Air  Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
60	69		1 hr.

Temperature of water 53 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 3S N or S, Range 3E E or W, WM.  
 Section 13 NE 1/4 NE 1/4  
 Tax Lot Lot Block Subdivision  
 Street Address of Well (or nearest address) 28904 SE Woods Road  
 Eagle Creek, Oregon 97022

(10) STATIC WATER LEVEL:  
 29 ft. below land surface. Date 5-10-88  
 Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES:

Depth at which water was first found 137 ft.

From	To	Estimated Flow Rate	SWL
137	146	73	29

(12) WELL LOG: Ground elevation

Material	From	To	SWL
Clay-brown	0	6	
Cement gravel-boulders	6	18	
Clay-brown	18	21	
Clay-gray	21	34	
Clay-blue	34	41	
Clay-sandy-gray	41	57	
Clay-blue	57	66	
Clay-gray	66	137	
Sand-pea gravel-black	137	146	29
Clay-gray	146	155	

Date started 5-4-88 Completed 5-10-88

(unbonded) Water Well Construction:

at st kn S (b) w work per belief. Signed

STEINMAN BROS. DRILLING CO.  
 (503) 654-2890  
 Well #

WWC Number 1  
 Date 5-21-88

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No 0234

“START CARD” WATER RESOURCES DEPARTMENT  
SALEM, OREGON  
NOTICE OF BEGINNING OF WELL CONSTRUCTION  
(as required by ORS 537.762)

This form must be completed, signed by both the owner (or authorized agent) and constructor, and the original delivered to the Water Resources Department prior to commencement of construction, alteration or abandonment of each well.

Owner's Name and Mailing Address TWIN ISLAND COMMUNITY/Bruce Ryan manager  
28904 SE Woods Road  
Eagle Creek, Oregon 97022

Proposed Commencement Date May 4, 1988

Proposed Well Depth 160 ft., Diameter 8 inch  
and Use:  
 Domestic       Community       Industrial       Irrigation  
 Thermal       Injection       Other \_\_\_\_\_

Proposed Well Location: County Clackamas

Township 3S (N or S) Range 3E (E or W) Section 13

At least 2 of these must be provided

1. NE 1/4 of \_\_\_\_\_ 1/4 of above section
2. street address of well location \_\_\_\_\_
3. tax lot number of well location \_\_\_\_\_
4. attach approved map with location identified.  
(see reverse of this form for approved maps)

We hereby certify that we have read the back of this form, and that to the best of our knowledge the information provided herein is accurate and the well is being properly located from septic tanks and septic drain fields.

X \_\_\_\_\_  
Owner's Signature

x Ronald E. McConelly  
Bonded Water Well Constructor

\_\_\_\_\_  
Title

#1  
License No. STEINMAN BROS. DRILLING CO.

\_\_\_\_\_  
Date

Company \_\_\_\_\_

Note: This is not a Water Right application. The owner is responsible for obtaining a Water Right through the Water Resources Department if required.