

CLAC 20017

Westerberg Drilling, Inc. 36728 S. Kropf Rd. Molalla, OR 97038

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55/2E/4b

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

MAR 6 1995 (START CARD) # 73186

Instructions for completing this report are on the last page of this report 100-2526

WATER RESOURCES DEPT.

(1) OWNER: Well Number Name ROY MOORHOUSE Address 13963 S. VICK RD. City MOLALLA State OR Zip 97038

(2) TYPE OF WORK [X] New Well [] Deepening [] Alteration (repair/recondition) [] Abandonment

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

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

(5) BORE HOLE CONSTRUCTION: Special Construction approval [] Yes [X] No Depth of Completed Well 340 ft. Explosives used [] Yes [X] No Type Amount

Table with columns: HOLE Diameter, From, To, SEAL Material, From, To, Sacks or pounds. Includes rows for CEMENT, BENTONITE, and 8' CEMENT PLUG.

How was seal placed: Method [] A [] B [X] C [] D [] E Backfill placed from 346 ft. to 400 ft. Material HOLE CAVED Gravel placed from ft. to ft. Size of gravel

(6) CASING/LINER: Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Includes rows for Casing and Liner.

Final location of shoe(s) 340

(7) PERFORATIONS/SCREENS: Table with columns: From, To, Slot size, Number, Diameter, Material, Casing, Liner. Includes rows for 3/8x3 screens.

(8) WELL TESTS: Minimum testing time is 1 hour. [] Pump [X] Bailer [] Air [] Flowing Artesian. Yield gal/min 105, Drawdown 21, Drill stem at, Time 1 hr. PUMP TEST NOT YET PERFORMED

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 CLACKAMAS Latitude Longitude Township 5S N or S Range 2E E or W. WM. Section 4 SW 1/4 NW 1/4 Tax Lot 300 Lot Block Subdivision Street Address of Well (or nearest address) 13963 S. VICK RD.

(10) STATIC WATER LEVEL: 13 ft. below land surface. Date 2-16-95 Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES: Depth at which water was first found 36

Table with columns: From, To, Estimated Flow Rate, SWL. Includes row for 100 to 304 with flow rate 100+ and SWL 13.

(12) WELL LOG: Ground Elevation

Table with columns: IN Material, From, To, SWL. Lists layers like TOPSOIL, CLAY BROWN, COBBLES WITH CLAY, CEMENTED GRAVEL & CLAY BRN, etc.

Date started 1-7-95 Completed 2-16-95

(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 the best of my 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 Steven N. Stadel WWC Number 688 Date 2-28-95

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MAR - 6 1995

(START CARD) #

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

Instructions for completing this report are on the last page of this form. WATER RESOURCES DEPT.

(1) OWNER: Well Number _____

Name ROY MOORHOUSE
Address 13963 S. VICK RD.
City MOLALLA State OR Zip 97038

(2) TYPE OF WORK
 New Well Deepening Alteration (repair/recondition) Abandonment

(3) DRILL METHOD:
 Rotary Air Rotary Mud Cable Auger
 Other _____

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other _____

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

HOLE SEAL
Diameter From To Material From To Sacks or pounds

Diameter	From	To	Material	From	To	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:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<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"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Diameter	Material	Tele/pipe size	Casing	Liner
100	122	3/8x3	363				XX	<input type="checkbox"/>
148	218	3/8x3	1155				XX	<input type="checkbox"/>
276	304	3/8x3	462				XX	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

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

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

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 _____ Latitude _____ Longitude _____
Township _____ N or S Range _____ E or W. WM. _____
Section _____ 1/4 _____ 1/4 _____
Tax Lot _____ Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) _____

(10) STATIC WATER LEVEL:
_____ ft. below land surface. Date _____
Artesian pressure _____ lb. per square inch. Date _____

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

From	To	Estimated Flow Rate	SWL

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
CLAY BRN	304	363	
CLAY GREY W/SOME SAND	363	370	
STREAKS			
CLAY GREY GREEN	370	396	
SAND FINE CEMENTED	396	400	

Date started _____ Completed _____

(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 the best of my knowledge and belief.
WWC Number _____
Signed _____ 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.
WWC Number 688
Signed Stevie N. Stadel Date 2-28-95

CLAC 20017



Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem Oregon 97301
(503) 986-0900
www.oregon.gov/owrd

Application for Well ID Number

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Do not complete if the well already has a Well Identification Number.

APR 10 2020

OWRD

I. OWNER INFORMATION

Current Owner Name (please print): Kristi L. Moorhouse

Mailing Address: 36704 S. Hibbard Rd.

City, State, Zip: Molalla, OR 97038

Mail Well ID to: SAME AS ABOVE In Care Of (C/O)

Name & Address: Dickman Farms, Inc.

City, State, Zip: 15829 Mt. Angel-Scotts Mills Rd. NE, Silverton, OR 97381

II. WELL LOCATION INFORMATION (Please fill out as completely as possible)

Township: 5S (North / South) Range: 2E (East / West) Section: 4 SW 1/4 of the NW 1/4

Tax Lot (usually last 3-5 numbers of Tax Map #): 300 County Clackamas

GPS Coordinates: _____

Street Address of Well, City: 13963 S. Vick Rd, Molalla 97038

If the property had a different street address in the past: _____

III. GENERAL WELL INFORMATION (Please fill out as completely as possible, AND attach copy of Well Report, if available)

Use of Well (domestic, irrigation, commercial, industrial, monitoring): Irrigation

Date Well Constructed (or property built): 2-16-1995 Total Well Depth: 340' Casing Diameter: 12"

Owner at time the well was constructed (if known): Roy Moorhouse Well Report # (if known): CLAC 20017 and

Other Information: _____ CLAC 20304 (alt)

SUBMITTED BY (please print): Dickman Farms, Inc. (tenant) by Mark Dickman, Secretary

PHONE: 503-845-6472 EMAIL &/or FAX: dfarms@mtangel.net

Send application to: Oregon Water Resources Department 725 Summer St NE, Suite A, Salem, Oregon 97301; or fax to (503) 986-0902. Applications are processed in the order they are received, and Well ID Numbers are mailed within 4-5 business days.

For Official Use Only by the Oregon Water Resources Department:

Received Date:
4-10-2020

Well Report Number:
CLAC 20017 (original) and
CLAC 20304 (alteration)

Well Identification #:
L-137442