

#14

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

CLAC
2004

MAR 11 1991

55/1E/14 AC

WATER RESOURCES DEPT (START CARD) # 19819

(1) OWNER:

Name Charlie Lucht-Crestview Farms
Address 33364 S. Dryland Rd.
City Molalla State OR Zip 97038

Well Number: _____

(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 720 ft.
Explosives used ☐ Yes ☒ No ☐ Type _____ Amount _____

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
12	0	24	Gran. Bent.	0	24	28 sacks
12	560	583	Cement Grt.	560	583	15 sacks

How was seal placed: Method ☐ A ☐ B ☒ C ☐ D ☐ E
☒ Other Poured granular dry

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"	0	583	.250	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

☐ Perforations Method _____
☐ Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						☐	☐
						☐	☐
						☐	☐
						☐	☐
						☐	☐
						☐	☐

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

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
150		720	1 hr.

Temperature of water 55 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 5 N or S, Range 1E E or W, WM.
Section 14 SW 1/4 NE 1/4
Tax Lot 400 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) n/a

(10) STATIC WATER LEVEL:

174 ft. below land surface. Date 10-25-90
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 631

From	To	Estimated Flow Rate	SWL
117	123	15	
158	170	10	
357	368	60	
403	415	300	

(12) WELL LOG:

Ground elevation _____

Material	From	To	SWL
Top soil	0	3	
Clay brown	3	12	
Gravel	12	20	
Clay brown	20	35	
Clay sandy brown	35	50	
Clay brown sticky	50	57	
Clay grey	57	75	
Clay grey silty	75	85	
Sandstone grey	85	105	
Claystone grey	105	117	
Sand grey	117	123	WB
Claystone grey	123	128	
Clay blue sticky	128	140	
Clay grey sticky	140	158	
Sand grey	158	170	WB
Clay Blue	170	178	
Claystone blue	178	185	
Clay grey	185	260	
Claystone blue	260	277	
Clay green	277	282	
Clay brown	282	305	
Clay grey	305	317	
Continued...			

Date started 10-3-90 Completed 10-25-90

(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 well construction standards. Materials used and information reported above are true to my best knowledge and belief.

Signed [Signature] WWC Number 1454
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 well construction standards. This report is true to the best of my knowledge and belief.

Signed [Signature] WWC Number 723
Date _____

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

CLAC
2004

MAR 11 1991

(START CARD) #

(1) OWNER:

Name Charlie Lucht-Crestview Farms

Address Continuation...

City State Zip

Well Number:

(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 ft.

Explosives used Yes No Type Amount

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	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:					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

☐ Perforations Method
☐ Screens Type Material

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						☐	☐
						☐	☐
						☐	☐
						☐	☐
						☐	☐
						☐	☐

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

☐ Pump ☐ Bailer ☐ Air ☐ Flowing ☐ Artesian

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
631	640	20	
670	680	25	
705	720	100	

(12) WELL LOG:

Ground elevation

Material	From	To	SWL
Claystone grey	317	325	
Clay grey	325	357	
Sand black	357	368	WB
Clay grey	368	388	
Claystone grey	388	403	
Sand blue fine	403	415	WB
Clay blue	415	425	
Clay grey	425	460	
Clay blue	460	503	
Claystone blue	503	525	
Claystone conglomerant	525	540	
Claystone w/ sandstone streaks	540	560	
Basalt weathered	560	573	
Basalt black hard	573	623	
Claystone grey	623	626	
Wood	626	631	
Basalt pourous	631	640	WB
Claystone conglomerant	640	655	
Basalt grey	655	670	
Basalt fractured	670	680	WB
Basalt black	680	705	
Basalt pourous	705	720	WB

Date started 10-3-90 Completed 10-25-90

(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 well construction standards. Materials used and information reported above are true to my best knowledge and belief.

WWC Number 1454

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

WWC Number 723

Signed Date

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2005

MAR 11 1991

55/1E/14 ac

START CARD) # 19819

Well Number:

WATER
SAL

City Molalla State OR Zip 97038

☐ New Well ☐ Deepen ☒ Recondition ☒ Abandon

☒ Rotary Air ☐ Rotary Mud ☐ Cable
☐ Other _____

☐ Domestic ☐ Community ☐ Industrial ☒ Irrigation
☐ Thermal ☐ Injection ☐ Other _____

Special Construction approval Yes ☐ No ☒ Depth of Completed Well _____ ft.

Explosives used Yes ☐ No ☒ Type _____ Amount _____

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

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐

Final location of shoe(s)

☒ Perforations Method Air
☐ Screens Type _____ Material _____

[illegible]☐ Pump ☐ Bailer ☒ Air ☐ Flowing
☐ Artesian

Yield gal/min	Drawdown	Drill stem at	Time
150		300	1 hr.

Was a water analysis done? - ☒ Yes By whom owner

Did any strata contain water not suitable for intended use? ☐ Too little

☒ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other _____

Depth of strata: 720-631

County Clackamas Latitude " Longitude
Township 5 N or S. Range 1E E or W. WM.
Section 14 SW $\frac{1}{4}$ NE $\frac{1}{4}$
Tax Lot 400 Lot Block Subdivision
Street Address of Well (or nearest address) N/A

120 ft. below land surface. Date 1-25-90
Artesian pressure lb. per square inch. Date

Depth at which water was first found

From	To	Estimated Flow Rate	SWL

Ground elevation _____

[illegible]

Date started 1-20-91 Completed 1-25-91

I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.

Signed LMC WWC Number 1454
Date _____

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 _____
Date _____