

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

MAR 30 1987

CLAC  
 02114

55/1W-14ad

WATER RESOURCES DEPT.  
 SALEM, OREGON

**(1) OWNER:**

Name JOE CORNADO  
 Address 201 N LOCUST  
 City AURORA State ILL Zip 60506

Owner's 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:**

Depth of Completed Well 186 ft.  
 Special Standards date of approval \_\_\_\_\_

Diameter	From	To	SEAL		Amount	
			Material	To		
10	1	20	Cement	1	20+	14
6	20	186				

How was seal placed? Method  A  B  C  D  E

Other TREMI

Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
 Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Size of gravel \_\_\_\_\_

**(6) CASING/LINER:**

Casing	Diameter	From	To	Gauge	SEAL			
					Steel	Plastic	Welded	Threaded
	6	0	186	1280	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) \_\_\_\_\_

**(7) PERFORATIONS/SCREENS:**

Perforations Method STAR DRIVE DOWN  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
85	142	3/8 x 1.5	75			<input checked="" type="checkbox"/>	<input type="checkbox"/>
178	182	3/8 x 1.5	60			<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

<input checked="" type="checkbox"/> Pump	<input type="checkbox"/> Bailer	<input type="checkbox"/> Air	<input type="checkbox"/> Flowing	<input type="checkbox"/> Artesian
Yield gal/min	Pumping level	Drill stem at	Time	
50	105		2 1/2 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 CLACK Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
 Township 55 N or S, Range 1W E or W, WM.  
 Section 14 NE 1/4 NE 1/4  
 Tax Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) 4761 S. KILINGSLOOP  
WOODBURN, OR

**(10) STATIC WATER LEVEL:**

60 ft. below land surface. Date MAR 21  
 Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

**(11) WELL LOG:**

Material	From	To	WB?	SWL
TOPSOIL	1	3		
CLAY BROWN	3	30		
CLAY GREY	30	48		
SAND BROWN	48	58		
CLAY BROWN	58	75		
SAND BROWN	75	82	✓	
SAND GRAVEL	82	84	✓	
CLAY BROWN	84	96		
CLAY GREY	96	110		
SILT GREY	110	133		
GRAVEL Cemented Bn.	133	141	✓	
CLAY GREY Silty	141	154		
CLAY GREEN	154	160		
CLAY BLUE	160	180		
SAND BLACK SMALL GRVL	180	182	✓	
CLAY BLUE	182	187		

Date started MAR 17, 1987 Completed MAR 22, 1987

**(unbonded) Water Well Constructor Certification:**

I constructed this well in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.

Signed \_\_\_\_\_ Date \_\_\_\_\_

**(bonded) Water Well Constructor Certification:**

I accept responsibility for construction of this well and its compliance with all Oregon water well standards. This report is true to the best of my knowledge and belief.

Signed Richard Beck Date Mar 23, 1987

Company Beck Well Drilling Co. Job No. \_\_\_\_\_