NOTICE TO WATER WELL CONTRACTOR
The original and first copy of this report are to be filed with the WATER RESOURCES DEPARTMENT SALEM, OREGON 97310 within 30 days from the date of well completion.

RECEIVED APR 21 1980 WATER RESOURCES DEPT SALEM, OREGON

CLAC 3273

WATER WELL REPORT
STATE OF OREGON (Please type or print) (Do not write above this line)

03273

State Well No. 2S/1E-22cc

State Permit No.

(1) OWNER:
Name Jerry Carlson
Address 9263 S.W. Brier Pl.
Portland, Oregon

(2) TYPE OF WORK (check):
New Well ☒ Deepening ☐ Reconditioning ☐ Abandon ☐
If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:
Rotary ☒ Driven ☐
Cable ☐ Jetted ☐
Dug ☐ Bored ☐

(4) PROPOSED USE (check):
Domestic ☒ Industrial ☐ Municipal ☐
Irrigation ☐ Test Well ☐ Other ☐

(5) CASING INSTALLED:
Threaded ☐ Welded ☒
6 " Diam. from 0 ft. to 19 ft. Gage .250
" Diam. from ft. to ft. Gage
" Diam. from ft. to ft. Gage

(6) PERFORATIONS:
Perforated? ☐ Yes ☒ No
Type of perforator used
Size of perforations in. by in.
perforations from ft. to ft.
perforations from ft. to ft.
perforations from ft. to ft.

(7) SCREENS:
Well screen installed? ☐ Yes ☒ No
Manufacturer's Name
Type Model No.
Diam. Slot size Set from ft. to ft.
Diam. Slot size Set from ft. to ft.

(8) WELL TESTS:
Drawdown is amount water level is lowered below static level
Was a pump test made? ☐ Yes ☒ No If yes, by whom?
Yield: gal./min. with ft. drawdown after hrs.
" " " "
" " " "
Bailer test 4 gal./min. with 60 ft. drawdown after 2 hrs.
Artesian flow g.p.m.
Temperature of water Depth artesian flow encountered ft.

(9) CONSTRUCTION:
Well seal—Material used Cement
Well sealed from land surface to ~~Ground~~ 19 ft.
Diameter of well bore to bottom of seal 10 in.
Diameter of well bore below seal 6 in.
Number of sacks of cement used in well seal 5 sacks
How was cement grout placed? Pumped
Was a drive shoe used? ☐ Yes ☒ No Plugs Size: location ft.
Did any strata contain unusable water? ☐ Yes ☐ No
Type of water? depth of strata
Method of sealing strata off
Was well gravel packed? ☐ Yes ☒ No Size of gravel:
Gravel placed from ft. to ft.

(10) LOCATION OF WELL:
County Clackamas Driller's well number
SW ¼ SW ¼ Section 22 T. 2S R. 1E W.M.
Bearing and distance from section or subdivision corner

(11) WATER LEVEL: Completed well.
Depth at which water was first found 164 ft.
Static level 120 ft. below land surface. Date 8-14-79
Artesian pressure lbs. per square inch. Date

(12) WELL LOG:
Diameter of well below casing 6
Depth drilled 202 ft. Depth of completed well 202 ft.

Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level and indicate principal water-bearing strata.

MATERIAL	From	To	SWL
Top soil	0	2	
Brown clay	2	7	
Basalt soft	7	11	
Basalt black w/scoria	11	164	
Basalt black fractured w/ scoria. (water 4 gpm)	164	202	120

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Work started 8-14 19 79 Completed 8-16 19 79
Date well drilling machine moved off of well 8-16 19 79

Drilling Machine Operator's Certification:
This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.
[Signed] Daniel V. Wyland (Drilling Machine Operator) Date 9-20, 1979
Drilling Machine Operator's License No. 718

Water Well Contractor's Certification:
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Name D.V. Wyland Co. 12425 s.e. river rd. (Person, firm or corporation) (Type or print)
Address Milwaukie, Oregon 97222
[Signed] Daniel V. Wyland (Water Well Contractor)
Contractor's License No. 554 Date 9-20, 19

(USE ADDITIONAL SHEETS IF NECESSARY)

SP*45656-119

RECEIVED
JUN - 6 1996
WATER RESOURCES DEP
SALEM, OREGON

WELL IDENTIFICATION FORM

Owner's Well Number: _____

CURRENT WELL OWNER:

Phone 657 0402

Name: SANDRA CARLSON

Mailing Address: 20656 S. Fernview Rd.

City: West Linn State: OR Zip: 97068

If a well report is available for this well, please attach a copy of it to this form and return. It is not necessary for you to complete the remainder of the form if the well report is attached. If a well report is not available, please complete the remainder of the form to the best of your ability.

WELL LOCATION:

County: CLACKAMAS 3273 Latitude: _____ Longitude: _____

Township: 2 N or S, Range: 1E E or W Section: 22D _____ 1/4 _____ 1/4

Tax Lot Number: 3300

Street Address of Well (if different from above): _____

WELL INFORMATION:

Start Card Number: _____ Approx. Construction Date: 1979

Well Constructor: DANIEL V. WYLAN

Name of Owner at Time of Construction: CARLSON

Well Depth (in feet): 202' Static Water Level (in feet): 127'

Diameter of Exposed Well Casing (in inches): _____

Does this well have a formal water right associated with it? Yes: _____ No: X If yes:

Application #: _____ Permit #: _____ Certificate #: _____

Please Return Completed Form to: **Oregon Water Resources Department**
158 12th Street NE
Salem, OR 97310

(Office use only)

Well Identification Number: L 06369