

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.

**CLAC 3408**  
**WATER WELL REPORT**  
**RECEIVED**  
**STATE OF OREGON**  
(Please type or print)  
**AUG 24 1978**

State Well No. 031E-26  
State Permit No. \_\_\_\_\_

WATER RESOURCES DEPT.  
SALEM, OREGON

**(1) OWNER:**

Name ED S. Saunders  
Address 134 Touchstone Terrace  
Lake Oswego, 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

**CASING INSTALLED:**

Threaded  Welded   
6" Diam. from +2 ft. to 40 ft. Gage .250  
" Diam. from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Gage \_\_\_\_\_  
" Diam. from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Gage \_\_\_\_\_

**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? Driller  
d: 30 gal./min. with \_\_\_\_\_ ft. drawdown after 1 hrs.  
ir rotary total " " "  
" " " "  
Bailer test \_\_\_\_\_ gal./min. with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ 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 40 ft.  
Diameter of well bore to bottom of seal 9 in.  
Diameter of well bore below seal 6 in.  
Number of sacks of cement used in well seal 8 sacks  
How was cement grout placed? \_\_\_\_\_  
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 D-151-78  
N 1/4 Section 26T, 2S R. 1E W.M.  
Bearing and distance from section or subdivision corner  
Parcel #2 t.l. 100

**(11) WATER LEVEL: Completed well.**

Depth at which water was first found 18 ft.  
Static level 75 ft. below land surface. Date 7/19/78  
Artesian pressure \_\_\_\_\_ lbs. per square inch. Date \_\_\_\_\_

**(12) WELL LOG:**

Diameter of well below casing 6"

Depth drilled 142 ft. Depth of completed well 142 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	1	
clay Brown	1	6	
boulders med.	6	10	
Claystone brwn	10	12	
Basalt Broken	12	23	
Clay Dark Brwn	23	34	
basalt gray	34	52	
Sandstone Gray	52	64	
Basalt Gray	64	67	Trace
basalt Gray	67	137	
Decomposed Rock	137	141	75
Clay Yellow	141	142	

Work started 8/17/78 Completed 8/19/78  
Date well drilling machine moved off of well 8/19/78

**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] Nancy W. Barnett Date 8/22, 1978  
(Drilling Machine Operator)  
Drilling Machine Operator's License No. 1038

**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 S&M Drilling & Supply Inc.  
(Person, firm or corporation) (Type or print)  
Address 399 SE Walnut St Canby, Oregon 97013  
[Signed] Walter Pace  
(Water Well Contractor)  
Contractor's License No. 497 Date 8/22/1978



Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem Oregon 97301
(503) 986-0900
www.wrd.state.or.us

Application for
Well ID Number

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

I. OWNER INFORMATION

Current Owner Name (please print): Thomas and Alix Edwards
Mailing Address: 1148 Rosemont Road
City, State, Zip: West Linn OR 97068
Mail Well ID Tag to: [X] SAME AS ABOVE [ ] In Care Of (C/O)
Name & Address:
City, State, Zip:

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

Township: 2 (North/South) Range: 1 (East/West) Section: 26
Tax Lot: 00104 County: Clackamas 1/4 1/4
GPS Coordinates:
Street Address of Well, City: 1148 Rosemont Road West Linn
If the property had a different street address in the past:

III. GENERAL WELL INFORMATION (Please fill out as completely as possible)

Use of Well (domestic, irrigation, commercial, industrial, monitoring): domestic
Date Well Constructed (or property built): 1994? Total Well Depth: Casing Diameter: 6"
Owner at time the well was constructed (if known): Herman
Other Information: Previous owners (per CLAC county): Grace + Ed Saunders (1978-1994)

SUBMITTED BY (please print): Alix Edwards
PHONE: 503 3493031 EMAIL &/or FAX: alixedwards@comcast.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:

3-4-16

Well Log Number:

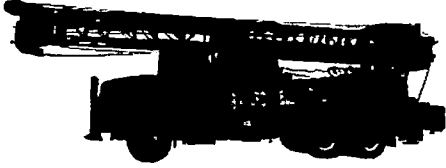
CLAC 3408

Well Identification #:

L-121726

RECEIVED BY OWRD

(OWRD STAFF IDENTIFIED LOG)
Well I.D. Number/2



Since 1948

# Skyles Drilling, Inc.

21912 S. Beaver Creek Rd.

Oregon City, Oregon 97045

503-656-2683 info@skyleswelldrilling.com

September 17, 2013

## FINAL REPORT

Tim & Ann Bechtold  
1148 S Rosemont Rd  
West Linn, OR 97068

### RE: TWO HOUR FLOW/POTABILITY/NITRATE/ARSENIC RESULTS

We certify that the well serving **1148 S Rosemont Rd, West Linn** pumps **21 gallons per minute** at **43 psi** after a continuous two hour pumping period.

Tech Notes: This 6" well, located in the NW corner of the lot, surrounded by Christmas trees, covered by a pressure treated wood box, has a wellhead 12" above grade with a pitless adapter and an aluminum Huntley brand well sanitary seal. The pressure system, located in the house crawlspace on a cement slab, has a diaphragm pressure tank and a Franklin Electric control box MO#2823018202 for a 2hp submersible pump. The larger trees, within a 15' diameter from the wellhead, may need to be removed to prevent casing damage by the roots. The smaller trees are not likely to be a concern.

Water samples were drawn from the well serving **1148 S Rosemont Rd, West Linn** and delivered to Edge Analytical Laboratories, Inc. See results below.

Test samples were collected by Skyles Drilling, Inc., on **September 13, 2013**.

*Potability, Nitrate and Arsenic Passes.*

Potability / Nitrate / Arsenic **ORELAP Accredited Lab#: OR-100063 Reference#: 13-17298**

Date Collected: **9/13/13** Time Collected: **11:00 AM** Collected By: **Jonathan**  
Date / Time Received by lab: **9/13/13 11:45 AM** Received By: **TBP** Lab Sample No. **39140**  
Date / Time Analyzed by lab: **9/14/13 4:00 PM** Analyzed By: **TBP**  
Bacteria Test Results: **PASSES** Total Coliforms: **ABSENT** Total E.coli / Fecal: **ABSENT**  
Test Methods: Coliform Bacteria (SM9223B) **Colilert-18**  
Nitrate Analysis: **PASSES, 1.91 mg/L** CAS:14797-55-8 Method: SM4500-NO<sub>3</sub>D EPA MCL is 10 mg/L, MDL 0.01 mg/L  
Analysis Date: **9/13/13** By: **CPO**  
Arsenic Analysis: **PASSES, ND mg/L** CAS:7440-38-2 Method: EPA 200.8 EPA MCL is 0.010 mg/L, MDL 0.00028 mg/L  
Analysis Date: **9/17/13** By: **MVP** **ND = None Detected**

*Test results relate only to the parameters tested and to the samples as received by the laboratory. Test results meet all requirements of NELAC unless otherwise noted. If the result is Unsatisfactory a repeat sample is required for Public Water Systems. Private individuals should investigate the cause of the unsatisfactory result and resample. If E.Coli or Fecal Coliform are present in sample do not drink the water until it is properly treated. MCL=Maximum Contaminant Level MDL=Method Detection Limit.*

**NOTICE: REAL ESTATE TRANSACTION SAMPLE RESULTS NEED TO BE REPORTED TO THE STATE.**

**See attached Water Systems Data Sheet. Send report to: Domestic Well Testing, DHS-Drinking Water Program, P.O. Box 14350, Portland, OR 97293**

Regards,

Kirk Wood  
General Manager

KJW/mae

RECEIVED BY OWRD

MAR 04 2016

SALEM, OR