

STATE ENGINEER
Salem, Oregon

CLAC

04419

Well Record

STATE WELL NO. 2/2-31F(1)
COUNTY Clackamas
APPLICATION NO. GR-707

OWNER: Publisher's Paper Co.

MAILING
ADDRESS:

CITY AND
STATE:

Oregon City, Oregon

LOCATION OF WELL: Owner's No. 1

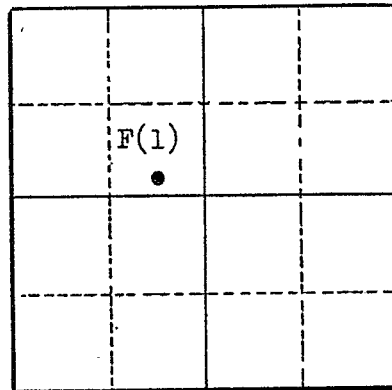
SE $\frac{1}{4}$ NW $\frac{1}{4}$ Sec. 31 T. 2 N. S., R. 2 E. W.M.

Bearing and distance from section or subdivision

corner Approx. 3370 feet West & 2380 feet South

from NE corner of Section 31, T.2 S.

R. 2 E.



Section 31

Altitude at well 120' Interpolated

TYPE OF WELL: Drilled Date Constructed 1940

Depth drilled 250' Depth cased 17

CASING RECORD:

12-inch

FINISH:

AQUIFERS:

WATER LEVEL:

49 feet

PUMPING EQUIPMENT: Type Deming turbine H.P. 20
Capacity 220 G.P.M.

WELL TESTS:

Drawdown 41 ft. after _____ hours 230 G.P.M.

Drawdown _____ ft. after _____ hours _____ G.P.M.

USE OF WATER Manufacturing Temp. _____ °F. _____, 19____

SOURCE OF INFORMATION GR-707

DRILLER or DIGGER R.J. Strasser Drilling Co., Portland, Oregon

ADDITIONAL DATA:

Log X Water Level Measurements _____ Chemical Analysis _____ Aquifer Test _____

REMARKS:

State Well No. 2/2-31F(1)
County Clackamas
Application No. GR-707

Owner: Publisher's Paper Company Owner's No. 1
Driller: R. J. Strasser Date Drilled 1940

[illegible]



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

RECEIVED

JAN 23 2025

OWRD

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

I. OWNER INFORMATION

Current Owner Name (please print): CONFEDERATED TRIBES OF GRAND RONDE

Mailing Address: 9615 GRAND RONDE RD

City, State, Zip: GRAND RONDE, OR 97347

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

Name & Address: *Do Not Mail Well Inspector Attached on site.* L 155955

City, State, Zip: _____

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

Township: 2S (North / South) Range: 2E (East / West) Section: 31 SE 1/4 of the NW 1/4

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

GPS Coordinates: 45.353688, -122.612747

Street Address of Well, City: 417 Main St. Oregon City, OR

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): Manufacturing

Date Well Constructed (or property built): 1940 Total Well Depth: 251' Casing Diameter: 12"

Owner at time the well was constructed (if known): _____ Well Report # (if known): CLAC 4419

Other Information: Associated with GR-707

SUBMITTED BY (please print): Josh Lucas, NW Region Well Inspector

PHONE: 971-428-7192 EMAIL &/or FAX: josh.c.lucas@water.oregon.gov

To send the completed application, you may MAIL it to: Oregon Water Resources Dept. 725 Summer St NE, Suite A, Salem, Oregon 97301.
Or EMAIL the completed PDF form to: Ladeena.K.Ashley@water.oregon.gov, or FAX it to: (503) 986-0902.

For Official Use Only by the Oregon Water Resources Department:

Received Date:
1-23-2025

Well Report Number:
CLAC 4419

Well Identification #:
L-155955