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25/3E-9 ca  
Record

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

JUN 3 - 1987

WATER RESOURCES DEPT.  
OREGON

(1) OWNER:

Name Damascus Water District  
Address 19750 S. E. Damascus Lane  
City Boring State OR Zip 97009

(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:

Permit Construction approval Yes No   Depth of Completed Well 715 ft.  
Explosives used   Type Amount

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
12-inch	0	625				
10-inch	625	695				
8-inch	695	715				

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:

Casing/ Liner:	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8-inch	580	660	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
OD 7-inch	660	680	.188	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

Final location of shoe(s) 7-inch & 8-inch liners welded together

(7) PERFORATIONS/SCREENS:

Perforations Method Torch  
 Screens Type Material

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
21	678	1/4	200			<input type="checkbox"/>	<input checked="" type="checkbox"/>

(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 Clack. Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 2-South N or S, Range 3-East E or W, WM.  
Section 9 NE  $\frac{1}{4}$  NE  $\frac{1}{4}$   
Tax Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) \_\_\_\_\_

(10) STATIC WATER LEVEL:

451 ft. below land surface. Date \_\_\_\_  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_

(11) WATER BEARING ZONES:

From	To	Estimated Flow Rate	SWL

(12) WELL LOG:

Ground elevation \_\_\_\_\_

Material	From	To	SWL

Date started 3-23-87 Completed 4-22-87

(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. Driller's Well Number: 10-87

WWC Number \_\_\_\_  
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.

Signed [Signature] WWC Number \_\_\_\_  
Date 5-15-87