

WATER WELL REPORT
STATE OF OREGON

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JUL 8 1981

State Well No. 15/3E-27

WATER RESOURCES DEPT.
SALEM, OREGON

State Permit No. _____

(1) OWNER: **COVENANT**
Name **HILLSVIEW EVANGELICAL CHURCH**
Address **23225 SE BORGES RD.**
City **GRESHAM** State **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 Air Driven Rotary Mud Dug Bored Thermal
(4) PROPOSED USE (check): Domestic Industrial Municipal Irrigation Test Well Other Withdrawal Reinjection

CASING INSTALLED: Steel Plastic Threaded Welded
6" Diam. from 0 ft. to 205 ft. Gauge 250"

LINER INSTALLED:
" Diam. from _____ ft. to _____ ft. Gauge _____

(6) PERFORATIONS: Perforated? Yes No
Type of perforator used **MILLS KNIFE**
Size of perforations **1/8** in. by **2** in.
_____ perforations from **170** ft. to **204** ft.

(7) SCREENS: Well screen installed? Yes No
Manufacturer's Name _____
Type _____ Model No. _____
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.
Air test _____ gal./min. with drill stem at _____ ft. _____ hrs.
Bailer test **30** gal./min. with **5** ft. drawdown after **1** hrs.
Artesian flow _____ g.p.m.
Temperature of water _____ Depth artesian flow encountered _____ ft.

(9) CONSTRUCTION: Special standards: Yes No
Well seal—Material used **CEMENT**
Well sealed from land surface to **1.50** ft.
Diameter of well bore to bottom of seal **10" B"** in.
Diameter of well bore below seal **6"** in.
Number of sacks of cement used in well seal **1A** sacks
How was cement grout placed? **PUMPED**
Was pump installed? **NO** Type _____ HP _____ Depth _____ ft.
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 **496**
¼ Section **27** T. **1S** R. **3E** W.M.
Tax Lot # _____ Lot _____ Blk _____ Subdivision _____
Address at well location: _____

(11) WATER LEVEL: Completed well.
Depth at which water was first found **170** ft.
Static level **120** ft. below land surface. Date **5/22/81**
Artesian pressure _____ lbs. per square inch. Date _____

(12) WELL LOG: Diameter of well below casing _____
Depth drilled **205** ft. Depth of completed well **205** 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	
RED CLAY	7	25	
BROWN CLAY	25	71	
CLAY AND GRAVEL	71	102	
CEMENTED GRAVEL	102	158	
BROWN CLAY	158	162	
CEMENTED GRAVEL	162	185	120
LOOSE GRAVEL	185	198	120
CEMENTED GRAVEL	198	205	120

Work started **5-5** 19**81** Completed **5/22** 19**81**
Date well drilling machine moved off of well **5/22** 19**81**

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] **OKeller** Date **6/8, 1981**
(Drilling Machine Operator)
Drilling Machine Operator's License No. **329**

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 **Keller Well Drilling Co.**
(Person, firm or corporation) (Type or print)
Address **6350 SE BROWNLEE MILWAUKEE**
[Signed] **OKeller**
(Water Well Contractor)
Contractor's License No. **462** Date **6/8**, 19**81**

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.

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