

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

**CLAC**  
**509 85**  
Skyles Drilling, Inc.  
1169 Molalla Ave.  
Oregon City, OR 97045  
656-2683

Well ID#L04007

(START CARD) # 87769

Instructions for completing this report are on the last page of this form.

(1) OWNER: Well Number 01  
Name Richard Copisarow/JM Crossley Inc  
Address 18305 Lothlorine Way  
City Lake Oswego State Or. Zip 97034

(2) TYPE OF WORK  
 New Well  Deepening  Alteration (repair/recondition)  Abandonment

(3) DRILL METHOD:  
 Rotary Air  Rotary Mud  Cable  Auger  
 Other

(4) PROPOSED USE: Water Rights #7457  
 Domestic  Community  Industrial  Irrigation  
 Thermal  Injection  Livestock  Other

(5) BORE HOLE CONSTRUCTION:  
Special Construction approval  Yes  No Depth of Completed Well 208ft.  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE		SEAL	
Diameter	From To	Material	From To Sacks or pounds
12"	0 45	Gran Bent	0 45 17 sacks
8"	45 208		
4x8 Shale Trap at 155Ft.			
		hole plug	155 43 12 sacks

How was seal placed: Method  A  B  C  D  E  
 Other Poured  
Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Size of gravel \_\_\_\_\_

(6) CASING/LINER:

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:	8	+1 1/2	45	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:	4	3	208	160	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) None

(7) PERFORATIONS/SCREENS:  
 Perforations Method Saw  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
190	206	1/8x3	80			<input type="checkbox"/>	<input checked="" type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour

Yield gal/min	Drawdown	Drill stem at	Flowing Time
135		204	1 hr.

Temperature of water 56° 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 Clackamas Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 2 South N or S Range 1 East E or W. WM.  
Section 31 NE 1/4 NW 1/4  
Tax Lot 600 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) 5822 SW Delker Rd. Tualatin, Or.

(10) STATIC WATER LEVEL:  
153 ft. below land surface. Date 8-21-96  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found 80'

From	To	Estimated Flow Rate	SWL
80	98	12	72
158	206	135	153

(12) WELL LOG:  
Ground Elevation \_\_\_\_\_

Material	From	To	SWL
Clay Brown	0	4	
Basalt Brown Weathered	4	23	
" Gray soft	23	39	
" Gray	39	65	
" Gray & Brown Porous	65	98	
" Gray	98	158	
" Red	158	164	153
" Brown porous broken	164	177	153
" Gray fractured	177	195	153
" Brown Porous	195	206	153
" Gray	206	208	

**RECEIVED**  
SEP 20 1996  
WATER RESOURCES DEPT.  
SALEM, OREGON

Date started 8-14-96 Completed 8-21-96

(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 water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.  
Signed Steven C. Skyles WWC Number 553 Date 8-23-96

(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 water supply well construction standards. This report is true to the best of my knowledge and belief.  
Signed Steven C. Bland WWC Number 1592 Date 8-23-96