

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

RECEIVED

WELL I.D.# L10400

MAY 30 1997

WATER RESOURCES DEPT.

(START CARD) # 095331

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

SALEM, OREGON

(1) OWNER: Well Number 432
Name Reardon Nursery #3
Address 10050 SE 282nd
City Boring State OR Zip 97009

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

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

(4) PROPOSED USE:
☐ Domestic ☐ Community ☐ Industrial ☒ Irrigation
☐ Thermal ☐ Injection ☐ Livestock ☐ Other

(5) BORE HOLE CONSTRUCTION:
Special Construction approval ☐ Yes ☒ No Depth of Completed Well 500 ft.
Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
12	0	70	cement	0	70	54
8	70	300	cement	70	300	54
7 3/8	300	500				

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:

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:	8	2	300	1/4	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:	6	25	500	1/4	☒	☐	☒	☐
					☐	☐	☐	☐

Final location of shoe(s) 300

(7) PERFORATIONS/SCREENS:

		Method		Material	
☒ Perforations		air knife			
☐ Screens					
From	To	Slot size	Number	Diameter	Tele/pipe size
340	500	1/2 x 12	3200		6

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

☐ Pump	☐ Bailer	☒ Air	☐ Flowing
Yield gal/min	Drawdown	Drill stem at	Time
36		500	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 Clack Latitude _____ Longitude _____
Township 2 N or S Range 4 E or W. WM.
Section 2 NW 1/4 SE 1/4
Tax Lot 05501 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 13725 SE Bluff Rd.
Sandy, OR

(10) STATIC WATER LEVEL:
295 ft. below land surface. Date 5-8-97
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL
65	160	36	42
270	290	36	95
340	500	36	295

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
Clay Brown & Red	0	25	
Clay Whiter Brown	25	30	
Gravel Cemented	30	35	
Clay Brown White	35	65	
Gravel	65	160	42
Sand Cemented Brown & Yellow	160	270	
Clay Brown	270	290	95
Clay Blue	290	305	
Clay Gray	305	330	
Clay Blue	330	340	
Clay Blue & Gray & Gravel Strong	340	360	295
Sand Coarse & Loose	360	365	295
Clay & Claystone Gray & Brown	365	405	
Clay Blue & Green	405	430	
Sand Coarse Loose	430	440	
Clay White & Gray	440	465	
Clay Green	465	500	295

Date started 5-8-97 Completed 5/21/97
(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.
WWC Number 1622
Signed James A. Smith Date 5-23-97

(bonded) Water Well Constructor Certification:
I accept responsibility for the construction, alteration, or abandonment work performed on this well in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.
WWC Number 663
Signed Bob C. Gil Date 5-23-97