

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

CLAC
 52774

673584

(START CARD) # _____

(1) OWNER: Well Number: _____
 Name Dean H Sumpter
 Address 222 N Maple St North
 City Cannock State Ore Zip 97013

(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:
 Special Construction approval Yes No Depth of Completed Well 190 ft.
 Yes No
 Explosives used Type _____ Amount _____

HOLE		SEAL		Amount sacks or pounds
Diameter	From To	Material	From To	
1 1/2"	0 27	Cement	0 70	33 Sacks
		159 1/2" 2 1/2"		
	27 190			

How was seal placed: Method A B C D E
 Other drilled through side drill pipe
 Backfill placed from 70 ft. to 0 ft. Material Cement/Bent
 Gravel placed from 100 ft. to 70 ft. Size of gravel 1/4" minus

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 1"	+1	190	220	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
1 1/2" pipe	+1	70	120	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 190

(7) PERFORATIONS/SCREENS:
 Perforations Method Start pipe down
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
75	95	1/4"	175	6		<input checked="" type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailor Air Flowing Artesian
 Yield gal/min 50 Drawdown 66 Drill stem at _____ Time 4 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 Clackamas Latitude _____ Longitude _____
 Township 39 Nor S, Range 1E E or W, WM.
 Section 25 SW 1/4 SE 1/4
 Tax Lot 1700 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) 222 N Maple St
North Cannock Ore 97013

(10) STATIC WATER LEVEL:
34 ft. below land surface. Date 4-6-90
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found 88 to 94

From	To	Estimated Flow Rate	SWL
88	94	30 gpm	34
190	190	20	34

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
TOP SOIL	0	2	
Brown clay	2	12	
Brown silty clay	12	32	
Blue silty clay	32	56	
Gray clay	56	60	
Reddish Brown sandy clay	60	66	
Dark Gray clay	66	94	
Light blue clay	94	98	
Blue silty sand	98	96	34
Light Gray clay	96	109	
Blue clay	109	152	
Dark Brown clay	152	170	
Reddish Brown silty sand (mud)	170	190	
Streaks of silty sand/clay	190	190	34

The well was side drilled to 100 ft and gravel packed back to 70 ft. A 2 1/2" 12 ft drill pipe was brought to surface to add 1/4" gravel.

Date started 3-20-90 Completed 11-7-90

(unbonded) Water Well Construction Certification:
 I certify that the work I performed on the construction, alteration, 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.
 DEC 21 1993
 WWC Number _____
 Signed _____ WATER RESOURCES DEPT.

(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. 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.
 WWC Number 449
 Signed John W Beck Date 4-7-90