

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

WELL I.D.# 2-10813 FEB 17 1999

WATER RESOURCES DEPT.
SALEM, OREGON

88628

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

(1) OWNER:

Well Number _____

Name KERRY. SEIFRIED
Address 17835 SW. YAPUAN CT.
City TUALATIN State OREGON Zip 97062

(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 156 ft.
Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE				SEAL		
Diameter	From	To	Material	From	To	Sacks or pounds
10"	0	20	Bentonite	0	20	33 SACKS.
8"	19	27	Cement.	19	27	3 SACKS

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E
☒ Other D - Pore @ 90 mm Piro
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:	6"	+1 1/2	29	250	☒	☐	☒	☐
Liner:	4"	16	156	160	☐	☒	☐	☐

Final location of shoe(s) 27 1/2 feet

(7) PERFORATIONS/SCREENS:

Perforations		Method		Type		Material	
From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
116	156	8x5	90	4"		☐	☒

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

	☐ Pump	☒ Bailer	☐ Air	☐ Flowing
	Yield gal/min	Drawdown	Drill stem at	Artesian
	15 GPM	112		2 hrs

Temperature of water 53 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 Washington Latitude _____ Longitude _____
Township 6-S N or S Range 2-E E or W. WM.
Section 3 NE 1/4 NW 1/4
Tax Lot 501 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) _____

(10) STATIC WATER LEVEL:

18 ft. below land surface. Date 10-23-98
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 18'

From	To	Estimated Flow Rate	SWL
14	19	1 GPM	9
71	82	2-6 GPM	18
141	156	13-6 GPM	18

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
Soil - Brown	0	3	
Clay - Red - w small Boulders	3	6	
Clay - Brown - w small Boulders	6	14	
Rock - Brown - small Boulders	14	19	9'
W/B - 1 GPM			
Balsalt - Black - Hard + med.	19	32	
Balsalt - Gray - Hard	32	56	
Balsalt - Black - Hard + med.	56	71	
Balsalt - Black - small med.	71	82	
W/B - 3 GPM			18'
Balsalt - Black Hard	82	97	
Balsalt - Black Hard + med	97	141	
Balsalt - Black med w.	141	156	
Small med. w.			18
13 GPM			

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Date started 10-5-98 Completed 10-23-98

(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 _____

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 water supply well construction standards. This report is true to the best of my knowledge and belief.

WWC Number 1593

Signed _____

Date 11-10-98