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SKYLES DRILLING, INC.  
1169 Molalla Ave.

Oregon City, OR 97045

(503) 656-2683 Fax (503) 656-2684

WELL I.D. # L 30046

START CARD # 118521

STATE OF OREGON WATER RESOURCES DEPT  
WATER SUPPLY WELL PERMITS, OREGON  
(as required by ORS 537.765)

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

(1) OWNER: Well Number 01  
Name Crispin Silza  
Address 10600 SE McCreary Ln.  
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 230 ft.  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
10	0	30	Bentonit	30	0	11 Sacks
6	30	230				

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

Casing/Liner	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:	6	+1 1/2	218 1/2	2 1/2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:	4	210	230	1 60#	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 218 1/2'

(7) PERFORATIONS/SCREENS:

Perforations Method Saw  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
211	229	1/8 x 3/16	100			<input type="checkbox"/>	<input checked="" type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour  
 Pump  Bailer  Air  Artesian  
Yield gal/min 40 Drawdown \_\_\_\_\_ Drill stem at \_\_\_\_\_ Time 1 hr.  
Temperature of water 57° Depth Artesian Flow Found \_\_\_\_\_

Was a water analysis done?  Yes By whom Driller no iron  
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 5 South N or S Range 2 East E or W. WM.  
Section 7D SE 1/4 SE 1/4  
Tax Lot 4102 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) 31997 Ona Way  
Molalla, Oregon

(10) STATIC WATER LEVEL:  
158 ft. below land surface. Date 2/25/99  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:  
Depth at which water was first found 2'

From	To	Estimated Flow Rate	SWL
2	19	2	2
183	188	3	158
221	230	40	158

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

Material	From	To	SWL
Soil, Brown	0	2	
Clay, Brown, Silty w/ Gravel, medium	2		
Clay, Brown, Silty	19	27	
Cemented Sand, M. C.	27	32	
Gravel & Clay, Brn, Silty	32	37	
Clay, Brn, Silty w/Seams of Sand, Brn, Med-Fine	37	53	
Clay, Brown, Gritty	53	56	
Clay, Blue, Gray, Gritty	56	71	
" Blue, Gray, Sandy, Silty	71	148	
" Bluish Gray, Gritty, silty		183	
Sand, Black, SemiCemented	183	188	158
Clay, Gray, Sandy & Silty	188	221	
Cemented Sand, Gray, Frac w/Seams of sand, Blk, Med	221	230	158

Date started 2/22/99 Completed 2/24/99

(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 [Signature] WWC Number 1601 Date 3/2/99

(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 [Signature] WWC Number 1592 Date 3-2-99