

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

CLAC  
 54496

(START CARD) # 098030

(1) OWNER: Well Number LO 9801  
 Name Adrain Fisher  
 Address 30218 S Appaloosa Dr  
 City Malatto State Ore Zip 97038

(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 230 ft.  
 Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
12	0	23	Cement	23	0	18
8	23	230				

How was seal placed: Method  A  B  C  D  E  
 Other TOP

Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
 Gravel placed from 230 ft. to 208 ft. Size of gravel 3/4 to 1/2

(6) CASING/LINER:

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

Final location of shoe(s) \_\_\_\_\_

(7) PERFORATIONS/SCREENS:

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

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

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

Pump  Bailor  Air  Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
300	7.4	210	1 hr.

Temperature of Water 52° 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 IT WAS 2 PER'  
 Depth of strata: 115 to 121

(9) LOCATION OF WELL by legal description:  
 County Clackamas Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
 Township H 9 N or S. Range 1 E E or W. WM.  
 Section 5 NE 1/4 NE 1/4  
 Tax Lot 406 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) \_\_\_\_\_

(10) STATIC WATER LEVEL:  
34 ft. below land surface. Date 4-12-99  
 Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:  
 Depth at which water was first found 122 FT.

From	To	Estimated Flow Rate	SWL
208	228	300	34

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

Material	From	To	SWL
Gravel cemented with Brown C.	0	46	
Gravel cemented with Blue clay	46	88	
Dark Blue clay (stickley)	88	101	
Blue clay with silt (water)	101	115	
Blue clay with sand streaks (water)	115	122	31
clay gray	122	142	
gray silty clay Gelling Darker	142	188	
Dark (Black) silt (sandy)	188	208	
Sand stone with streaks			
off clay and loose sand	208	228	34
Blue clay	228	230	

Date started 9-24-98 Completed 4-12-99  
 (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 well construction standards. Materials used and information reported above are true to my best 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 well construction standards. This report is true to the best of my knowledge and belief.  
 WWC Number 449  
 Signed John W Beck Date 4-12-99

RECEIVED  
 JUN 03 1999  
 WATER RESOURCES DEPT.  
 SALEM, OREGON

RECEIVED  
 APR 20 1999  
 WATER RESOURCES DEPT.  
 SALEM, OREGON