

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

MAY 18 1990

CLAC 060 (START CARD) # 25/4E/3dd  
 18607

(1) OWNER: Well Number: \_\_\_\_\_  
 Name FRESH FRUIT / HARRISON MCKNAUGHT  
 Address 35855 S.E. KELSO RD  
 City BOAINO State OR Zip 97009

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

HOLE		SEAL		Amount sacks or pounds
Diameter	From To	Material	From To	
14	0	60	0	43
8	0	425		

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:

Casing/Liner	Diameter	From	To	Gauge	Steel		Plastic		Welded		Threaded	
					✓		✓		✓		✓	
Casing	8	H	425	250	✓				✓			
Liner												

Final location of shoe(s) 425

(7) PERFORATIONS/SCREENS:  
 Perforations Method AIR KNIFE  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
380	420	1/8	2	100		✓	

(8) WELL TESTS: Minimum testing time is 1 hour  
 Pump  Bailer  Air  Artesian

Yield gal/min	Drawdown	Drill stem at	Time
150		420	1 hr.
150		380	1HR

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 CLACK Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
 Township 2S N or S Range 4E E or W, WM.  
 Section 3 SE 1/4 SE 1/4  
 Tax Lot 5200 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) SAME

(10) STATIC WATER LEVEL:  
200 ft. below land surface. Date 5-13/90  
 Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:  
 Depth at which water was first found 25

From	To	Estimated Flow Rate	SWL
25	35	30-40	12
85	90	5-10	50
260	280	50-100	200
375	420	100-150	200

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

Material	From	To	SWL
TOP SOIL	0	2	
BROWN CLAY	2	10	
Large Boulder	10	16	
BROWN CLAY	16	25	
Cemented GRAVEL & CLAY	25	36	12
Cemented GRAVEL / Large Boulder	36	95	50
BROWN CLAY	95	120	
BROWN SANDSTONE	120	130	
BLACK SAND	130	133	
BROWN CLAY	133	170	
BLACK ROCK	170	200	
Brown Clay & Sandstone	200	260	
Fine Brown Sand	260	280	200
Brown Clay & Sand	280	295	
Blue Clay	295	350	
Fine Black Sand	350	362	
Blue Clay & Blue Shell	362	375	
Blue Clay & SANDSTONE	375	390	
CORALS & Black Sand	390	405	
SANDSTONE	405	420	200
Blue Clay	420	425	

Date started 5-5-90 Completed 5-12-90

(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 116  
 Signed [Signature] Date 5-14-90