

STATE OF OREGON
WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

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

WELL I.D. # L

START CARD #

(1) LAND OWNER

Name JAMES R. Dierking Well Number _____
Address 20950 S. HARRIS RD.
City OREGON CITY State OREGON Zip 97045

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

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
12"	0	21	BENTONITE	0	21	23 SACKS
17"	21	91	CEMENT	21	91	1 YARD PLUS
8"	91	168	CASING			

How was seal placed: Method ☒ A ☐ B ☒ C ☐ D ☐ E

☒ Other BENTONITE POURED

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:	8"	H	158	200	☒	☐	☒	☐
Liner:					☐	☐	☐	☐

Drive Shoe used ☐ Inside ☒ Outside ☐ None

Final location of shoe(s) 158'

(7) PERFORATIONS/SCREENS:

☒ Perforations Method DRIVE DOWN PERF.
☐ Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
102	118	1/4" x 1/2"	180	8"		☒	☐
122	132	1/4" x 1/2"	288	8"		☒	☐

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

☐ Pump ☒ Bailer ☐ Air ☐ Flowing
Yield gal/min Drawdown Drill stem at Time

36	22		1 hr.
			4425

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 _____

Depth of strata: _____

(9) LOCATION OF WELL by legal description:

County CLATSOP Latitude 46° 15' 31.223" Longitude 122° 45' 26.5"

Township 2 N of Range 3 E or W. WM.

Section 27 SW 1/4 NE 1/4

Tax Lot 1500 Lot _____ Block _____ Subdivision _____

Street Address of Well (or nearest address) 20949 S. HARRIS RD. Oregon City, OR 97045

(10) STATIC WATER LEVEL:

31 ft. below land surface.

Date 4/6/06

Artesian pressure _____ lb. per square inch

Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL
97	132	100 gal	31

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
CLAY BROWN w/			
SMALL BOULDER	0	7	
CLAY BROWN			
1/4" GRAVEL	7	97	
LT. CEMENTED			
GRAVEL w/3.	97	132	31
SAND STONE			
LT. BROWN	132	168	31

RECEIVED

JUN 22 2006

WATER RESOURCES DEPT
SALEM, OREGON

Date started 1/29/06

Completed 5/6/06

(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 1328

Signed Mike Dick Date 6/5/06