

STATE OF OREGON

WATER SUPPLY WELL REPORT

(as required by ORS 537.765 & OAR 690-205-0210)

9/24/2017

WELL I.D. LABEL# L125668

START CARD # 1035834

ORIGINAL LOG #

(1) LAND OWNER

Owner Well I.D.

First Name JOHN

Last Name HAGAN

Company

Address 30574 S. STUWE RD

City CANBY

State OR

Zip 97013

(2) TYPE OF WORK

☒ New Well ☐ Deepening ☐ Conversion☐ Alteration (complete 2a & 10) ☐ Abandonment (complete 5a)

(2a) PRE-ALTERATION

Dia + From To Gauge Stl Plstc Wld Thrd

Casing: ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

Material From To Amt sacks/lbs

Seal: ☐ ☐ ☐ ☐ ☐ ☐

(3) DRILL METHOD

☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger ☐ Cable Mud☐ Reverse Rotary ☐ Other

(4) PROPOSED USE

☐ Domestic ☒ Irrigation ☐ Community☐ Industrial/ Commercial ☐ Livestock ☐ Dewatering☐ Thermal ☐ Injection ☐ Other

(5) BORE HOLE CONSTRUCTION

Special Standard ☐ (Attach copy)

Depth of Completed Well 224.60 ft.

BORE HOLE

Dia	From	To	Material	SEAL	From	To	Amt	sacks/
18	0	40	Cement w/4% Bentonite	0	50	7450	P	
12	40	50		Calculated			3569.42	
8	50	224.6		Calculated				

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

Backfill placed from _____ ft. to _____ ft. Material _____

Filter pack from _____ ft. to _____ ft. Material _____ Size _____

Explosives used: ☐ Yes Type _____ Amount _____

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount

Actual Amount

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
☒	☐	8	☒	3	224.6	250	☒	☐	☒	☐
☐	☐	6	☐	4.6	64.6	200	☐	☐	☐	☐
☐	☐	6	☐	84.6	164.6	200	☐	☐	☐	☐

Shoe ☐ Inside ☒ Outside ☐ Other Location of shoe(s) 224.6Temp casing ☒ Yes Dia 12 From + 0 To 50

(7) PERFORATIONS/SCREENS

Perforations Method push down perforator

Screens Type certalok

Material pvc

Perf/	Casing/	Screen	Dia	From	To	Scrm/slot	Slot	# of	Tele/
Screen	Liner					width	length	slots	pipe size
Perf	Casing	8	135	145	.25	1.25	240		
Perf	Casing	8	162	165	.25	1.25	48		
Perf	Casing	8	173	186	.25	1.25	312		
Screen	Liner	6	64.6	84.6	.2				
Screen	Liner	6	164.6	224.6	.32				

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

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
160		224	2

Temperature 48 °F Lab analysis ☐ Yes By _____Water quality concerns? ☐ Yes (describe below) TDS amount 129 ppm

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County CLACKAMAS Twp 5 S N/S Range 1.00 E E/W WM

Sec 5 NW 1/4 of the SE 1/4 Tax Lot 2500

Max Map Number _____ Lot _____

Lat _____ " or _____ DMS or DD

Long _____ " or _____ DMS or DD

☒ Street address of well ☐ Nearest address

30574 S. STUWE RD

(10) STATIC WATER LEVEL

Date	SWL(psi)	+ SWL(ft)
Existing Well / Pre-Alteration		
Completed Well	8/23/2017	62

Flowing Artesian? ☐ Dry Hole? ☐

WATER BEARING ZONES

Depth water was first found 101.00

SWL Date _____ From _____ To _____ Est Flow SWL(psi) + SWL(ft)

8/23/2017	101	224.6	160		62

(11) WELL LOG

Ground Elevation

Material	From	To
top soil	0	2
brown clay	2	30
gray clay	30	52
brown sandstone	52	80
gray clay	80	84
gray sandy clay	84	101
gray claystone w/ sand seams	101	115
gray clay w/ fine sand	115	124
sand & gravel	124	127
fine black sand	127	129
large gravel	129	149
sand & gravel	149	159
gray sandy clay	159	161
sandstone	161	165
gray clay w/ fine sand & wood	165	167
sandstone	167	179
gray sandy clay	179	215
sandstone	215	224.6

Date Started 8/16/2017 Completed 8/23/2017

(unbonded) Water Well Constructor Certification

I certify that the work I performed on the construction, deepening, 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.

License Number _____ Date _____

Signed _____

FEB 26 2018

(bonded) Water Well Constructor Certification

I accept responsibility for the construction, deepening, 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.

License Number 1771 Date 9/24/2017

Signed GEORGE YOUNGBERG (E-filed)

Contact Info (optional) Youngberg Pump & Well Drilling ph. 503-630-3970

ORIGINAL - WATER RESOURCES DEPARTMENT

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version:

