

STATE OF OREGON

ABANDONMENT WELL REPORT

(as required by ORS 537.765, OAR 690-205-0210 & OAR690-240-0395)

WELL I.D. LABEL# L

START CARD #

(1) LAND OWNER

Owner Well I.D. _____

First Name _____

Last Name _____

Company West Linn School DistrictAddress 840 Dollar St.City West Linn State OR Zip 97068

(2) TYPE OF WELL

ORIGINAL LOG # _____

Hand dug

(3) EXISTING CONDITIONS

(not required if well report identified in (2) describes the well's current condition)

Depth of well 23 ft.

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

Casing	Liner	Screen	Hole	Dia	Above Land	From	To	Steel	Plastic	Other Material
☐	☐	☐	☐	<u>3'</u>	☒	<u>1</u>	<u>23</u>	☐	☐	<u>Brick</u>
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(4) ABANDONMENT PROCEDURE

Special Standard ☐ (Attach copy)

Casing	Liner	Screen	Hole	From	To	In-place	Pull	Perf	Size Perfs	# Perf	Other Info
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Overdrill ☐ Diameter _____ From _____ To _____

(5) ABANDONMENT MATERIAL(S)

Material	Dia. (in)	From	To	Amount	sacks/lbs	Calculated Amount
<u>Concrete</u>	<u>36</u>	<u>5</u>	<u>23</u>	<u>7 yds</u>		<u>4 yds</u>

Calculate Required Amounts

If you're using Adobe, the button above will calculate required amounts based on what you enter on pp. 1-2

Actual Cement		Sacks		lbs.	Actual Bentonite		Sacks		lbs.
Calculated Cement		Sacks		lbs.	Calculated Bentonite		Sacks		lbs.
Total Dissolved Solids _____					Temperature F _____				

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount Sacks Actual Amount Sacks

(6) LOCATION OF WELL (legal description)

County Clackamas Twp 2 S N/S Range 1 E E/W WMSec 34 NE 1/4 of the SW 1/4 Tax Lot 600

Tax Map Number _____ Lot _____

Lat 45.34992 or _____ DD or DMSLong -122.67617 or _____ DD or DMS

(X) Street address of well

() Nearest address

840 Dollar St

(7) STATIC WATER LEVEL

Existing Well/Pre-Abandonment Date 1/27 Above Land SWL(ft) 122.5 SWL(psi) _____

(8) DESCRIPTION OF ABANDONMENT

Ground Elevation _____

Abandonment of brick lined hand dug well.

RECEIVED

FEB 06 2023

OWRD
SALEM, OREGONDate Started 1/27/2023 Completed 1/27/2023

(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 Contractor Date 1-27-23Signed Jim Mills

(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 D.20 WM Date 1/27/2023Signed Chris Gardner

Contact Info (optional) _____