

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

NOV 13 1986

CLAC
08553
Deepening of CLAC 8580 XLW

3S/1W-2526
Record

(1) OWNER:
Name OSU N. Willamette Experiment Station
Address 15210 N.E. Miley Road
City Aurora State Oregon Zip 97002

WATER RESOURCES DEPT
Owner's Well Number: _____

(2) TYPE OF WORK:
 New Well Deepen Recondition Abandon

(3) DRILL METHOD:
 Rotary Air Rotary Mud Cable Other
Pump rig

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Other _____

(5) BORE HOLE CONSTRUCTION: Unchanged
Depth of Completed Well 128.5 ft.
Special Standards date of approval _____

HOLE		SEAL		Amount	
Diameter		Material			sacks or pounds
	From	To	From	To	

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:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:	<u>10</u>	<u>94</u>	<u>104.250</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Lead Packer	<u>104</u>	<u>105</u>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

location of shoe(s) _____

(7) PERFORATIONS/SCREENS: Unchanged
 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"/>
						<input type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailor Air Flowing Artesian
Yield gal/min 150+ Pumping level 108 Drill stem at 1 1/2 hr
1 hr

Temperature of water ~53°F 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 3S N or S, Range 1W E or W, WM.
Section 25 NW 1/4 of SE 1/4
Tax Lot _____ Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) _____

(10) STATIC WATER LEVEL:
46 ft. below land surface. Date 9/4/86
Artesian pressure _____ lb. per square inch. Date _____

(11) WELL LOG: Ground elevation Approx. 155

Material	From	To	WB?	SWL
No new drilling -				
Well was originally drilled by Zent				
in 1965 to 226' and completed to 129'.				
We pulled and overhauled 15HP line-				
shaft turbine, then bailed, swabbed,				
air jetted and superchlorinated well.				
Old lead packer came off screen during				
bailing so we preswedged as new lead				
packer and installed it inverted on				
the lower end of a 10' long piece of				
10" pipe. This pipe/packer assembly				
was tapped into position to create a				
seal between the new packer and screen.				
The top O.D. of the 10" pipe is wrapped				
with a 1-5/8" diameter rod and the				
pipe's top I.D. is beveled.				
The overhauled pump was then re-				
installed.				
(Packer came off 9/26/86)				
Date started <u>9/4/86</u>	Completed	<u>10/23/86</u>		

(unbonded) Water Well Constructor Certification:
I constructed this well in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.
Signed _____ Date _____
(bonded) Water Well Constructor Certification:
~~I accept responsibility for construction of this well and its compliance with all Oregon water well standards.~~ This report is true to the best of my knowledge and belief.
Signed Stephen Schneider Date 11/5/86
Company Schneider Equip, Inc Co. Job No. 8635