

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

CLAC 9913

CLAC

58/22/4dd

009913

MAR 20 1989

(START CARD) # 7610

(1) OWNER:

Name Claire Marshall
 Address 14610 S. Vaughn Rd
 City Molalla, OR 97038 State _____ Zip _____

Well Number: _____

(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 88 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
10	0	60	cement	0	60	21
6	60	88				

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:	6	+2	60	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:	4	8	88	160	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 60

(7) PERFORATIONS/SCREENS:

Perforations Method Skill saw
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
68	88	1/8x7x67				<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
45		86	1 hr.
5 flowing artesian			

Temperature of water 51 Depth Artesian Flow Found 88

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 5S N or S, Range 2E E or W, WM.
 Section 4 SE $\frac{1}{4}$ SE $\frac{1}{4}$
 Tax Lot 903 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) 14610 S. Vaughn Rd, Molalla, OR 97038

(10) STATIC WATER LEVEL:

+2 ft. below land surface. Date 3-1-89
 Artesian pressure 3 to 5 lb. per square inch. Date 3-1-89

(11) WATER BEARING ZONES:

Depth at which water was first found 80

From	To	Estimated Flow Rate	SWL
80	88	45	0

(12) WELL LOG:

Ground elevation _____

Material	From	To	SWL
soil, brown	0	1	
boulders, medium	1	9	
conglomerate, cement	9	39	
sandstone	39	68	
clay, blue w/sand	68	80	
clay, blue/ gravel, med.	80	88	0

Date started 3-1-89 Completed 3-1-89

(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 726

Signed Daniel P. Merrill Date 3-1-89



Oregon Water Resources Department
 725 Summer Street NE, Suite A
 Salem Oregon 97301
 (503) 986-0900
 www.wrd.state.or.us

Application for Well ID Number

Do not complete if the well already has a Well Identification Number.

I. OWNER INFORMATION

Current Owner Name (please print): Jaime & Shea Conely
 Mailing Address: 2129 NW Northrup Street #4
 City, State, Zip: Portland, OR 97210
 Mail Well ID Tag to: SAME AS ABOVE In Care Of (C/O)
 Name & Address: Always Pure Water Systems, PO Box 8
 City, State, Zip: Boring, OR 97009

II. WELL LOCATION INFORMATION (Please fill out as completely as possible)

Township: 5S (North / South) Range: 2E (East / West) Section: 4
 Tax Lot: 903 County Clackamas SE 1/4 SE 1/4
 GPS Coordinates: _____
 Street Address of Well, City: 14610 S Vaughan RD Molalla, OR 97038
 If the property had a different street address in the past: _____

III. GENERAL WELL INFORMATION (Please fill out as completely as possible)

Use of Well (domestic, irrigation, commercial, industrial, monitoring): Irrigation
 Date Well Constructed (or property built): 3-1-89 Total Well Depth: 88 Casing Diameter: 6"
 Owner at time the well was constructed (if known): Clare Marshall
 Other Information: CLAC 9913

RECEIVED BY OWRD

SUBMITTED BY (please print): Michael Klobes - Always Pure Water Systems POB 8 Boring OR OCT 26 2017
 PHONE: 503-668-9287 EMAIL &/or FAX: info@always-pure.com

SALEM, OR

Send application to: Oregon Water Resources Department 725 Summer St NE, Suite A, Salem, Oregon 97301; or fax to (503) 986-0902. Applications are processed in the order they are received, and Well ID Numbers are mailed within 4-5 business days.

For Official Use Only by the Oregon Water Resources Department:

Received Date:

10-26-17

Well Log Number:

CLAC 9913

Well Identification #:

L-128616