

50727

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

JUN 15 1993

WELL I.D. # L 19672  
START CARD # 98746

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

(1) OWNER: Well Number 3

Name JIM MILES  
Address 33530 RODNEY RD.  
City WARREN State OR Zip 971053

(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 120 ft.  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
10	0	40	Bentonite	0	40	172 bags
6	40	120				

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	Material			
				Steel	Plastic	Welded	Threaded
Casing: 6	+1	40	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 4.5	-3	120		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 40

(7) PERFORATIONS/SCREENS:

Perforations Method Drill Hole  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
110	70	1/2				<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
20		120	1 hr.

Pump  Bailer  Air  Flowing Artesian

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 COLUMBIA Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 5N N or S Range 1W E or W. WM.  
Section 7 SW 1/4 NE 1/4  
Tax Lot 3200 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) CANAAN RD. DEER ISLAND, OR 97054

(10) STATIC WATER LEVEL:  
80 ft. below land surface. Date 12 3 97  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:  
Depth at which water was first found 100

From	To	Estimated Flow Rate	SWL
100	110	20	80

(12) WELL LOG:  
Ground Elevation \_\_\_\_\_

Material	From	To	SWL
clay	0	35	
sand stone	35	120	80

RECEIVED  
JUL 30 1998  
WATER RESOURCES DEPT.  
SALEM, OREGON

Date started 12 2 97 Completed 12 3 97

(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 1480  
Signed AM Malle Date 12-14-97