

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

**DESC**  
**1356**

JUN 30 1992

155/10E/18CB

(START CARD) # 42435 labeled

**(1) OWNER:**  
 Name Mark Peterson Well Number \_\_\_\_\_  
 Address 150 Birdshull  
 City Portland State Ore Zip 97219

**(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 438 ft.  
 Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

Diameter	HOLE		Material	SEAL		Amount sacks or pounds
	From	To		From	To	
12"	0	26	cement	26	10	55 sacks
8"	26	438	bentonite	10	0	12 sacks

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

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: 8"	+ 1	26	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 6"	-6	438	.188	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) \_\_\_\_\_  
**(7) PERFORATIONS/SCREENS:**  
 Perforations Method machine  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
418	438	1/8by3	228			<input type="checkbox"/>	<input checked="" type="checkbox"/>

**(8) WELL TESTS: Minimum testing time is 1 hour**  
 Pump  Bailer  Air  Flowing Artesian  
 Yield gal/min 20 after Drawdown liner installed Drill stem at 438 Time 1 hr.

Temperature of Water 51 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 Des Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
 Township 15 S N or S. Range 10 E E or W. WM.  
 Section 18 NW 1/4 SW 1/4  
 Tax Lot 2200 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) \_\_\_\_\_

14845 Remuda Rd Sisters, Ore  
**(10) STATIC WATER LEVEL:**  
367 ft. below land surface. Date 6-3-92  
 Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

**(11) WATER BEARING ZONES:**  
 Depth at which water was first found 370

From	To	Estimated Flow Rate	SWL
370	398		367
416	438		367

**(12) WELL LOG:**  
 Ground elevation \_\_\_\_\_

Material	From	To	SWL
brn soil	0	2	
brn congl crse	2	8	
brn basalt	8	14	
gray basalt	14	65	
redish gray basalt	65	83	
gray basalt	83	110	
gray basalt w/clay seams	110	143	
brn basalt	143	169	
gray basalt	169	175	
L C hard	175	191	
L C med	191	221	
L C hard	221	260	
L C soft	260	295	
L C hard	295	338	
L C soft caving (4 1/2 yds)	338	370	
L C med (WB)?	370	387	
L C brkn (WB)?	387	398	
L C hard	398	416	
L C soft (WB)	416	438	

Date started 5--=27-92 Completed 6-3-92  
**(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.

Signed [Signature] WWC Number 1317  
 Date 6-10-92

**(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.

Signed [Signature] WWC Number 595  
 Date 6-10-92