

OCT 08 1999

DESC
52656

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765) **WATER RESOURCES DEPT.**
SALEM, OREGON
Instructions for completing this report are on the last page of this form.

WELL I.D. # L 36274
START CARD # 124235

(1) OWNER: _____ Well Number _____
Name Bill Perry
Address 850 NW 103rd St.
City Redmond State OR Zip 97756

(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 508 ft.
Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
12"	0	27.5	Concrete	0	27.5	12
8"	27.5	50.8				

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"	+1.5	27.5	250	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:	6"	-8	508		☐	☐	☐	☐
					☐	☐	☐	☐

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

☒ Perforations Method Factory
☐ Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
488	508	1/8"x3"	256	6"		☐	☒
						☐	☐
						☐	☐
						☐	☐
						☐	☐
						☐	☐

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

Yield gal/min	Drawdown	Drill stem at	Time
20		500	1 hr.

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 DeSoto Latitude _____ Longitude _____
Township 15 S N or S Range 12 E E or W. WM.
Section 9 SE 1/4 NE 1/4
Tax Lot 201 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) _____

Street Address of Well (or nearest address)
1000 NW 103rd St.

(10) STATIC WATER LEVEL:

440 ft. below land surface. Date 9-23-99
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 462

From	To	Estimated Flow Rate	SWL
462	480	20 gpm	440

(12) WELL LOG:

Ground Elevation

Material	From	To	SWL
Sandy top soil + boulders	0	15	
Brn sand + Brn Clay	15	22	
Hard gray lava	22	116	
Red Cinders	116	155	
Brown SS	155	190	
Black SS	190	243	
Brown SS + Brown clay	243	270	
Brkn rock congl	270	288	
Fract gray lava	288	340	
Brkn rock congl + brn clay	340	378	
Brown SS	378	410	
Black SS	410	454	440
Fract gray lava	454	462	
Brn SS congl	462	480	
Brkn gray lava	480	508	

Date started 9-21-99 Completed 9-23-99

(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.

Signed Mark H. H. WWC Number Trainee
Date 10-4-99

(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.

Signed David L. Kuhn NWFC Number 1568
Date 10-5-99