

STATE ENGINEER, SALEM, OREGON 97310  
within 30 days from the date  
of well completion.

RECEIVED WATER WELL REPORT  
OCT 5 1979 STATE OF OREGON  
ON 87310 (Please type or print)  
STATE ENGINEER  
SALEM OREGON (Do not write above this line)

GILL... 105

State Well No. 2N/20E-110

State Permit No. \_\_\_\_\_

Name JOHN BERRY  
Address 113 FOOTHILLS RD  
Lake Oswego OR

New Well ☐ Deepening ☒ Reconditioning ☐ Abandon ☐  
If abandonment, describe material and procedure in Item 12.

|        |                                     |         |                          |            |                                     |            |                          |           |                          |
|--------|-------------------------------------|---------|--------------------------|------------|-------------------------------------|------------|--------------------------|-----------|--------------------------|
| Rotary | <input type="checkbox"/>            | Driven  | <input type="checkbox"/> | Domestic   | <input type="checkbox"/>            | Industrial | <input type="checkbox"/> | Municipal | <input type="checkbox"/> |
| Cable  | <input checked="" type="checkbox"/> | Jettied | <input type="checkbox"/> | Irrigation | <input checked="" type="checkbox"/> | Test Well  | <input type="checkbox"/> | Other     | <input type="checkbox"/> |
| Dug    | <input type="checkbox"/>            | Bored   | <input type="checkbox"/> |            |                                     |            |                          |           |                          |

" Diam. from ..... ft. to ..... ft. Gage .....  
 " Diam. from *None* ft. to ..... ft. Gage .....  
 " Diam. from ..... ft. to ..... ft. Gage .....

| Size of perforations          | in. by       | in. |
|-------------------------------|--------------|-----|
| ..... perforations from ..... | ft. to ..... | ft. |
| ..... perforations from ..... | ft. to ..... | ft. |
| ..... perforations from ..... | ft. to ..... | ft. |

|                           |                 |                |              |          |
|---------------------------|-----------------|----------------|--------------|----------|
| Manufacturer's Name ..... |                 |                |              |          |
| Type .....                |                 | Model No. .... |              |          |
| Diam. ....                | Slot size ..... | Set from ..... | ft. to ..... | ft. .... |
| Diam. ....                | Slot size ..... | Set from ..... | ft. to ..... | ft. .... |

Was a pump test made? ☒ Yes ☐ No If yes, by whom? PUMP  
 Yield: 1000 gal./min. with 10 ft. drawdown after 8 hrs  
 " " " "  
 " " " "

| <u>Bailer test</u>   | <u>gal./min. with</u> | <u>ft. drawdown after</u> | <u>hrs</u> |
|----------------------|-----------------------|---------------------------|------------|
| <u>Artesian flow</u> | <u>g.p.m.</u>         |                           |            |

Temperature of water **68** Depth artesian flow encountered ..... ft.

Well seal—Material used ..... ft.

Well sealed from land surface to ..... ft.

Diameter of well bore to bottom of seal ..... in.

Diameter of well bore below seal ..... in.

Number of sacks of cement used in well seal ..... sacks

Number of sacks of bentonite used in well seal ..... sacks

Brand name of bentonite .....

Number of pounds of bentonite per 100 gallons  
of water ..... lbs./100 gallons

Was a drive shoe used? ☐ Yes ☒ No Plugs ..... Size: location ..... ft.

Did any strata contain unusable water? ☐ Yes ☒ No

Type of water? ..... depth of strata .....

Method of sealing strata off .....

Was well gravel packed? ☐ Yes ☒ No Size of gravel: .....

Gravel placed from ..... ft. to ..... ft.

County BILLIAM Driller's well number 7  
 1/4 1/4 Section 19 T. 2N R. 20E W.M.  
 Bearing and distance from section or subdivision corner

Depth at which water was first found 527 ft.

Static level 427 ft. below land surface. Date 4-3-72

Artesian pressure \_\_\_\_\_ lbs. per square inch. Date \_\_\_\_\_

**Formation:** Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level and indicate principal water-bearing strata.

[illegible]

Work started 1-21-72 19 Completed 1-3-72 19

Date well drilling machine moved off of well **4-20-72** 19

This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.

**EARL Lacey (Hospitalizer)**  
[Signed] \_\_\_\_\_ Date \_\_\_\_\_, 19\_\_\_\_\_  
(Drilling Machine Operator)

Drilling Machine Operator's License No. ....

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

Name LARRY BURD  
(Person, firm or corporation) (Type or print)

Address P O Box 417 Pendleton or

[Signed] Gary Burd

Contractor's License No. 544 Date 10-3, 1972