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

(START CARD) # 99102

(1) OWNER: Well Number L11032  
Name City of Mt. Vernon  
Address P.O. Box 647 199 West Main  
City Mt. Vernon State Ore. Zip 97135

(2) TYPE OF WORK  
 New Well  Deepening  Alteration (repair/recondition)  Abandonment

(3) DRILL METHOD:  
 Rotary Air  Rotary Mud  Cable  Auger  
 Other Reverse Rotary

(4) PROPOSED USE:  
 Domestic  Community  Industrial  Irrigation  
 Thermal  Injection  Livestock  Other

(5) BORE HOLE CONSTRUCTION:  
Special Construction approval  Yes  No Depth of Completed Well 165'  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE				SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds	
<u>18"</u>	<u>0</u>	<u>195</u>	<u>Cement grout</u>	<u>0</u>	<u>112</u>	<u>13 yards</u>	

How was seal placed: Method  A  B  C  D  E  
 Other \_\_\_\_\_  
Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
Gravel placed from 112 ft. to 195 ft. Size of gravel #6-19

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: <u>12"</u>	<u>+2</u>	<u>112</u>	<u>.375</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<u>8"</u>	<u>110'</u>	<u>115'</u>	<u>.374</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<u>8"</u>	<u>155'</u>	<u>169'</u>	<u>.374</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) \_\_\_\_\_

(7) PERFORATIONS/SCREENS:

Perforations Method Johnny tone  
 Screens Type Wire wrap Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele. pipe size	Casing	Liner
<u>115'</u>	<u>155'</u>	<u>.040</u>		<u>8"</u>		<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
<u>75</u>	<u>60'</u>		<u>4 hr.</u>

Temperature of water 58 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 Grant Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 13 N or  Range 30  or W. WM.  
Section 21 SW 1/4 SW 1/4  
Tax Lot 1500 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) Beside Mt. Vernon School

(10) STATIC WATER LEVEL:  
35' ft. below land surface. Date 5/31/97  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found \_\_\_\_\_

From	To	Estimated Flow Rate	SWL
<u>all gravel</u>	<u>below 35'</u>		

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

Material	From	To	SWL
<u>Topsoil</u>	<u>0</u>	<u>1</u>	
<u>gravel + boulders</u>	<u>1</u>	<u>17</u>	
<u>Gravel + Brn Clay</u>	<u>17</u>	<u>55</u>	
<u>Tan sandstone + clay</u>	<u>55</u>	<u>82</u>	
<u>Brn Sandstone, sand + gravel</u>	<u>82</u>	<u>103</u>	
<u>Greenish sandstone + gravel</u>	<u>103</u>	<u>107</u>	
<u>Blue Clay + sand + gravel</u>	<u>107</u>	<u>110</u>	
<u>sand + gravel</u>	<u>110</u>	<u>151</u>	
<u>Blue Clay</u>	<u>151</u>	<u>153</u>	
<u>sand + gravel</u>	<u>153</u>	<u>155</u>	
<u>Blue + Brn Clay</u>	<u>155</u>	<u>195</u>	

Date started 5-15-97 Completed 6-6-97

(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.  
Signed [Signature] WWC Number 1505 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.  
Signed [Signature] WWC Number 1906 Date \_\_\_\_\_