

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

WELL I.D. # L 67165
START CARD # 1169194

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

(1) LAND OWNER NORMAN S. STRASSER Well Number #2
Name NORMAN S. STRASSER
Address 19231 24th AVE WEST
City LYNWOOD State WA Zip 98036

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

(3) DRILL METHOD
☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger ☐ Cable Mud
☐ Other

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

(5) BORE HOLE CONSTRUCTION Special Construction: ☐ Yes ☒ No
Depth of Completed Well 90 ft.
Explosives used: ☐ Yes ☒ No Type Amount

BORE HOLE			SEAL			Sacks or Pounds
Diameter	From	To	Material	From	To	
10	0	38	BENTONITE	0	38	15 sacks
6	38	90				

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E

☐ Other pour in

Backfill placed from _____ ft. to _____ ft. Material 3/8-

Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER

Casing	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
6	42	38	.25	☒	☐	☐	☐	☐
Liner	5 9/16	10	90	.188	☒	☐	☐	☐

Drive Shoe used ☐ Inside ☐ Outside ☒ None

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS Method Factory Cut
☒ Perforations ☐ Screens Type 5 9/16 Material .863 Steel

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
60	80	.188	5	5 9/16	20	☐	☒

(8) WELL TESTS: Minimum testing time is 1 hour
☐ Pump ☐ Bailor ☒ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
7.5	100%	90	1.5 hrs.

Temperature of water 62 Depth Artesian Flow Found 63

Was a water analysis done? ☒ Yes By whom Coffey Labs.

Did any strata contain water not suitable for intended use? ☐ Too little

☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other

Depth of strata: _____

(9) LOCATION OF WELL (legal description)

County CLATSOP
Tax Lot 500 Lot _____
Township 13 N or S Range 30 or W WM
Section 36 NE 1/4 NW 1/4

Lat _____ " or _____ (degrees or decimal)
Long _____ " or _____ (degrees or decimal)

Street Address of Well (or nearest address)

58215 ANTELOPE LN. MT. VERNON

(10) STATIC WATER LEVEL

12 ft. below land surface. Date 18 July 05

_____ ft. below land surface. Date _____

Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES

Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL
63	75	7.5 gpm	12

(12) WELL LOG

Ground Elevation _____

Material	From	To	SWL
White Ash	0	12	12
SAND + GRAVEL	12	26	
BLUE CLAY	26	45	
GRAY CLAY + GRAVEL	45	50	
BRICK CLAY + GRAVEL	50	63	
SAND + GRAVEL	63	75	WBZ
GRAY CLAY + GRAVEL	75	90	

RECEIVED
AUG 01 2005
WATER RESOURCES DEPT
SALEM, OREGON

Date Started July 18 05 Completed 18 July 05

(unbonded) Water Well Constructor Certification

I certify that the work I performed on the construction, deepening, 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 1712 Date 18 July 05

Signed _____

(bonded) Water Well Constructor Certification

I accept responsibility for the construction, deepening, 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 1712 Date 18 July 05

Signed James W. Dean