

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

RECEIVED

MAR 17 1986 TELETYPE OR PRINT IN INK

385/4W-22cc
 (for official use only)

(1) OWNER:

Name Applegate School **SALEM, OREGON**
 Address 14188 Hwy. 238
 City Applegate State Ore.

(2) TYPE OF WORK (check):

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

(3) TYPE OF WELL:

Rotary Air Driven
 Rotary Mud Dug
 Bored

(4) PROPOSED USE (check):

Domestic Industrial Municipal
 Thermal:
 Irrigation Withdrawal Reinjection
 Other:
 Piezometric Grounding Test

(5) CASING INSTALLED:

Steel Plastic
 Threaded Welded
6" Diam. from 1.2 ft. to 71 ft. Gauge .250

(6) LINER INSTALLED:

Steel Plastic
 Threaded Welded

(6) PERFORATIONS:

Perforated? Yes No
 Size of perforations in. by in.
 perforations from _____ ft. to _____ ft.
 perforations from _____ ft. to _____ ft.
 perforations from _____ ft. to _____ ft.

(7) SCREENS:

Well screen installed? Yes No
 Manufacturer's Name _____ Model No. _____
 Type _____
 Diam. _____ Slot Size _____ Set from _____ ft. to _____ ft.
 Diam. _____ Slot Size _____ Set from _____ ft. to _____ ft.

(8) WELL TESTS:

Drawdown is amount water level is lowered below static level
 Was a pump test made? Yes No If yes, by whom?
 d: gal./min. with ft. drawdown after hrs.
 Air test 50 gal./min. with drill stem at 125 ft. 1 hrs.
 Bailer test gal./min. with ft. drawdown after hrs.
 Artesian flow g.p.m.
 Temperature of water 51° Depth artesian flow encountered _____ ft.

(9) CONSTRUCTION:

Special standards: Yes No
 Well seal—Material used Cement Grout
 Well sealed from land surface to 40 ft.
 Diameter of well bore to bottom of seal 10 in.
 Diameter of well bore below seal 6 in.
 Amount of sealing material 12 sacks pounds
 How was cement grout placed? grout pump

Was pump installed? no Type _____ HP _____ Depth _____ ft.
 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.

NOTICE TO WATER WELL CONSTRUCTOR
 The original and first copy of this report are to be filed with the

(10) LOCATION OF WELL by legal description:

County JACKSON SW 1/4 SW 1/4 of Section 22 of Township 38S Range 4W WM. (Township is North or South) (Range is East or West)
 Tax Lot 2700 Lot _____ Block _____ Subdivision _____
 MAILING ADDRESS OF WELL (or nearest address) same

(11) WATER LEVEL of COMPLETED WELL:

Depth at which water was first found 78 ft.
 Static level 45 ft. below land surface. Date 3/4/86
 Artesian pressure _____ lbs. per square inch. Date _____

(12) WELL LOG:

Diameter of well below casing 6"
 Depth drilled 130 ft. Depth of completed well 130 ft.
 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.

MATERIAL	From	To	SWL
Brown clay + boulders	0	20	
Brown clay	20	26	
Brn clay, gravel + boulders	26	43	
Brn clay + gravel	43	60	45
Brn clay + fractured rock	60	68	
Hard gray rock	68	73	
Hard gray rock w/f	73	130	

Date work started 2/3/86 /completed 3/4/86
 Date well drilling machine moved off of well 3/4 1986

(unbonded) Water Well Constructor Certification (if applicable):

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

[Signed] _____ Date _____, 19 _____

(bonded) Water Well Constructor Certification:

Bond 28033211 Issued by: Western Surety
 (number) (Surety Company Name)
 On behalf of Applegate Well Drilling
 (type or print name of Water Well Constructor)

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

(Signed) Charles B Pelkey
 (Water Well Constructor)

(Dated) 3/11/86

WATER RESOURCES DEPARTMENT,
 SALEM, OREGON 97310
 within 30 days from the date of well completion.

SP*46866-690