

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

Jack  
733  
RECEIVED  
JUN 20 1989  
345/1w/16  
9569

(START CARD) # 9569

(1) OWNER: Well Number: \_\_\_\_\_

Name **MIKE MALEPSY**  
Address **P.O. BOX 1004**  
City **SHADY COVE,** State **OR** Zip **97539**

(2) TYPE OF WORK:  
 New Well  Deepen  Recondition  Abandon

(3) DRILL METHOD  
 Rotary Air  Rotary Mud  Cable  
 Other \_\_\_\_\_

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

(5) BORE HOLE CONSTRUCTION:  
Special Construction approval Yes No  
Yes No   Depth of Completed Well 223 ft.  
Explosives used   Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
10"	0	44	CEMENT	0	44	12 SACKS
6"	44	223				

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

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel				Welded		Threaded	
				Steel	Plastic	Welded	Threaded	Welded	Threaded	Welded	Threaded
Casing: 6"	+2	44	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Final location of shoe(s) 44

(7) PERFORATIONS/SCREENS:  
 Perforations Method \_\_\_\_\_  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour  
 Pump  Bailer  Air  Flowing Artesian  
Yield gal/min **30 GPM** Drawdown **195** Drill stem at **223** Time **1 hr.**

Temperature of water \_\_\_\_\_ 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 **CLATSOP** Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township **34N** Nor S, Range **1W** E or W, WM.  
Section **16**  $\frac{1}{4}$   $\frac{1}{4}$   
Tax Lot **1400** Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) **NEXT TO 6675 ROGUE RIVER DRIVE, SHADY COVE**

(10) STATIC WATER LEVEL:  
28 ft. below land surface. Date **6-20-89**  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found 53

From	To	Estimated Flow Rate	SWL
53	63	12 GPM	28
78	140	30 GPM	28

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

Material	From	To	SWL
SOIL, BROWN	0	2	
CLAY, BROWN/SMALL BOULDER	2	11	
CONGLOMERATE, BROWN	11	38	
CLAYSTONE, BLUE	38	46	
CLAYSTONE, BROWN	46	48	
CLAYSTONE, BLUE	48	50	
CLAYSTONE, BROWN	50	54	
CLAYSTONE, BLUE	54	81	
CLAYSTONE, GREY	81	88	
CLAYSTONE, BLUE	88	103	
CLAYSTONE, GREY	103	140	
CLAYSTONE GREY, HARD	140	223	28

Date started 6-19-89 Completed 6-20-89

(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 well construction standards. Materials used and information reported above are true to my best knowledge and belief.

Signed **MEDINA WELL DRILLING** WWC Number \_\_\_\_\_  
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 well construction standards. This report is true to the best of my knowledge and belief.

Signed *Joaquin Medina* WWC Number **1207**  
Date **6-21-89**