

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

Start CARD # 2948

(1) OWNER: City of Creswell
Name: City of Creswell
Address: 13 South 1st
City: Creswell State: OR Zip: 97426
Well Number: TEST WELL #3

(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 Depth of Completed Well 191 ft.
Explosives used Yes No Type Amount

HOLE			SEAL			Amount sacks or pounds
Depth	From	To	Material	From	To	
12"	0	30	Cement	0	30	26
8"	30	199				

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	Plastic	Welded	Threaded
Casing: 8"	+2	110	.32	☒	☐	☒	☐
6"	135	176	.250	☒	☐	☒	☐
* 6"	192	197	.250	☒	☐	☒	☐
Liner: Brown Bottom Plate				☐	☐	☐	☐

Location of shoe(s) 198'

(7) PERFORATIONS/SCREENS:

From To		Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
110	120	.030	—	8"	TELE.	☐	☐
120	130	.035	—	8"	"	☐	☐
130	135	.040	—	8"	"	☐	☐
176	191	.040	—	8"	"	☐	☐
192'		PLATE w/ BAIL LOOP				☐	☐

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

Yield gal/min		Drawdown	Drill stem at	Time
125.		165		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 LANE Latitude _____ Longitude _____
Township 19S Nor S, Range 3W E or W, WM.
Section 13 SW 1/4 NW 1/4
Tax Lot _____ Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) West of 83294 Dale Kuni Rd, Creswell

(10) STATIC WATER LEVEL:

53 ft. below land surface. Date 8/10/88
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

From	To	Estimated Flow Rate	SWL
115	125	30 gpm	
128	137	40 gpm	
176	193	40 gpm	

(12) WELL LOG:

Material	From	To	SWL
TOP SOIL	0	5 1/2	
SAND & GRAVEL	5 1/2	18	
CEMENTED SAND & GRAVEL	18	24	
CLAY w/ SOME GRAVEL	24	33	
GRAVEL w/ CLAY	33	36	
CLAY w/ GRAVEL	36	96	
GRAVEL w/ CLAY	96	115	
COARSE BLUE/GRAY SAND & GRAVEL	115	124	
FINE BROWN SAND w/ GRAVEL	124	130	
COARSE GRAVEL / BLUE GRAY SAND	130	134	
COARSE GRAVEL	134	139	
COARSE GRAVEL / BLUE GRAY SAND	139	144	
SAND & GRAVEL w/ GREEN CLAY	144	149	
SAND & GRAVEL w/ BROWN CLAY	149	153	
GRAVEL w/ BROWN CLAY	153	158	
SAND & GRAVEL w/ CLAY	158	176	
COARSE SAND & FINE GRAVEL	176	190	
CEMENTED GRAVEL	190	191	
BLUE SAND & GRAVEL	191	196	
INTERFACE - BEDROCK	196	197	
BLUE VOLCANIC TUFF	197	199	

Date started 7/1/88 Completed 8/9/88

(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.

WWC Number _____
Signed _____ 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.

WWC Number 97
Signed _____ Date 8/15/88

"START CARD"
NOTICE OF BEGINNING OF WELL CONSTRUCTION
 (as required by ORS 537.762)

This form must be completed, signed by both the owner (or authorized agent) and constructor, and the original delivered to the Water Resources Department prior to commencement of construction, alteration or abandonment of each well.

Owner's Name and
Mailing Address

CITY OF CRESWELL

13 SOUTH 1ST

CRESWELL OR 97426

Proposed Commencement Date

6-29-88

Proposed Well Depth
and Use:

200'

Diameter

8"

☐ Domestic
☐ Thermal

☐ Community
☐ Injection

☐ Industrial
☐ Other

☐ Irrigation

TEST WELL #3

Proposed Well Location:

County LANE

Township

19S

(N or S)

Range

3W

(E or W)

Section

13

At least 2
of these
must be
provided

1. SW 1/4 of NW 1/4 of above section

2. street address of
well location

WEST OF R3294

DAKE KIVI RD

3. tax lot number of well location

4. attach approved map with location identified.
(see reverse of this form for approved maps)

We hereby certify that we have read the back of this form, and that to the best of our knowledge the information provided herein is accurate and the well is being properly located from septic tanks and septic drain fields.

X

Owner's Signature

X

Bonded Water Well Constructor

Title

License No.

97

Date

Company

CHRISTENSEN WELL DRILLING

Note: This is not a Water Right application. The owner is responsible for obtaining a Water Right through the Water Resources Department if required.