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70454

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

LANE  
5402

NOV 30 1994

(START CARD) #

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

WATER RESOURCES DEPT.

(1) OWNER:

Name Bob Macias  
Address 39098 Dexter Rd  
City Dexter State OR Zip 97331

(2) TYPE OF WORK

New Well  Deepening  Alteration (repair/recondition)  Abandonment

(3) DRILL METHOD:

Rotary Air  Rotary Mud  Cable  Auger  
 Other

(4) PROPOSED USE:

Domestic  Community  Industrial  Irrigation  
 Thermal  Injection  Livestock  Other

(5) BORE HOLE CONSTRUCTION:

Special Construction approval  Yes  No Depth of Completed Well \_\_\_\_\_ ft.  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE				SEAL			
Diameter	From	To	Material	From	To	Material	Weight
10	0	50	Portland	0	50	30	
6	50	225					

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: 6"	0	60	22	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 4 1/2"	60	225	50	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

(7) PERFORATIONS/SCREENS:

From		To		Slot size	Number	Diameter	Material	Tele/pipe size	Casing	Liner
185	225	18	40						<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
50+		220	1 hr.

Temperature of water 56° 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 \_\_\_\_\_ Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 19 N or S Range 01 E or W WM  
Section 16 1/4 \_\_\_\_\_ 1/4 \_\_\_\_\_  
Tax Lot 1020 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_

Street Address of Well (or nearest address) 39098 Dexter Rd / Dexter / OR / 97331

(10) STATIC WATER LEVEL:

35 ft. below land surface. Date 10-31-84  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found 220

From	To	Estimated Flow Rate	SWL
215	220	50 gpm	35

(12) WELL LOG:

Material	From	To	SWL
Top soil	0	4	
Boulders sandstone mix	4	28	
Clay Brown	28	40	
Blue Brown rock	40	90	
Blue rock	90	115	
Red Blue Gray rock	115	165	
Blue Gray soft rock	165	170	
Blue Green mix Rock	170	225	35

Date started 10-30 Completed 10-31-84

(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 \_\_\_\_\_ 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 water supply well construction standards. This report is true to the best of my knowledge and belief.

Signed [Signature] WWC Number 1553 Date 11-21-84