

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

LINN
4109

10S/2W/2800

55016

(START CARD) #

(1) **OWNER:**
 Name Lillian M. Sizemore Well Number 39229
 Address 36829 Glader Drive
 City Selo State OR Zip 97374

(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 66 1/2 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Amount (sacks or pounds)
Diameter	From	To	Material	From	To	
10	0	18	cement	0	18	11
6	17	66 1/2	Steel			

How was seal placed: Method A B C D E
 Other
 Backfill placed from 0 ft. to 18 ft. Material cement
 Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) **CASING/LINER:**

Diameter	From	To	Gauge	Material			
				Steel	Plastic	Welded	Threaded
Casing: <u>6</u>	<u>17</u>	<u>66 1/2</u>	<u>.250</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 66 1/2

(7) **PERFORATIONS/SCREENS:** nr

Perforations Method _____
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
<i>(This section is crossed out with a diagonal line)</i>							

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
<u>30</u>	<u>20</u>		<u>1 hr.</u>

Temperature of Water 52.0 Depth Artesian Flow Found _____
 Was a water analysis done? Yes No 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 Linn Latitude 44 38 15N Longitude 123 03 W
 Township 10S N or S. Range 2W E or W. WM.
 Section 28 SE 1/4 SE 1/4
 Tax Lot 01101 Lot _____ Block _____ Subdivision _____
 Street address of Well (or nearest address) 36829 Glader Drive Selo OR

(10) **STATIC WATER LEVEL:**
16 ft. below land surface. Date 9-22-93
 Artesian pressure _____ lb. per square inch. Date _____

(11) **WATER BEARING ZONES:**
 Depth at which water was first found 64

From	To	Estimated Flow Rate	SWL
<u>64</u>	<u>66 1/2</u>	<u>30</u>	<u>16</u>

(12) **WELL LOG:** Ground elevation 240

Material	From	To	SWL
<u>Clay Brown Hard</u>	<u>0</u>	<u>10</u>	
<u>Clay Brown Sandy</u>	<u>10</u>	<u>37</u>	
<u>Clay Brown + cement / Gravel</u>	<u>37</u>	<u>40</u>	
<u>Clay Gray Fluffy Hard</u>	<u>40</u>	<u>58</u>	
<u>Clay Gray + Black Sand</u>	<u>58</u>	<u>64</u>	
<u>Sand Black + Int gravel</u>	<u>64</u>	<u>66 1/2</u>	<u>16</u>

Date started 9-18-93 Completed 9-22-93

(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 _____ 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 Bob Scheler WWC Number 610
 Date 9-23-93