

RECEIVED *Santium Nurseries*
 SEP 1 1959

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STATE ENGINEER WATER WELL REPORT
 SALEM, OREGON LINN STATE OF OREGON G1571

State Well No. *1/2W-22L (1)*
 State Permit No. _____

(1) OWNER: *6710*
 Name *SANTIAM VALLEY NURSERIES*
 Address *RT. 2, BOX 224, LEBANON, ORE.*

(2) LOCATION OF WELL:
 County *LINN* Owner's number, if any—
NE 1/4 SW 1/4 Section 22 T. 11S. R. 2W W.M.
 Bearing and distance from section or subdivision corner
N. 89° 15' E. 17.5 CHAINS FROM SE CORNER OF HENRY V. CLYMER DEC 50

(3) TYPE OF WORK (check):
 New Well Deepening Reconditioning Abandon
 If abandonment, describe material and procedure in Item 11.

PROPOSED USE (check):
 Domestic Industrial Municipal
 Irrigation Test Well Other

(5) TYPE OF WELL:
 Rotary Driven
 Cable Jetted
 Dug Bored

(6) CASING INSTALLED:
 Threaded Welded
 9" Diam. from *Top* ft. to _____ ft. Gage *#250*
 _____" Diam. from _____ ft. to _____ ft. Gage _____
 _____" Diam. from _____ ft. to _____ ft. Gage _____

(7) PERFORATIONS:
 Perforated? Yes No
 Type of perforator used *Slots*
 SIZE of perforations *1/2"* in. by *8-10* in.
 _____ perforations from _____ ft. to _____ ft.
25 perforations from *21* ft. to *26* ft.
 _____ perforations from _____ ft. to _____ ft.
 _____ perforations from _____ ft. to _____ ft.

(8) SCREENS:
 Well screen installed Yes No
 Manufacturer's Name _____
 Type _____ Model No. _____
 Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.
 _____ Slot size _____ Set from _____ ft. to _____ ft.

(9) CONSTRUCTION:
 Was well gravel packed? Yes No Size of gravel: _____
 Gravel placed from _____ ft. to _____ ft.
 Was a surface seal provided? Yes No To what depth? _____ ft.
 Material used in seal—
 Did any strata contain unusable water? Yes No
 Type of water? _____ Depth of strata _____
 Method of sealing strata off _____

(10) WATER LEVELS:
 Static level *14* ft. below land surface Date *8-7-59*
 Artesian pressure _____ lbs. per square inch Date _____

Log Accepted by:
 [Signed] *Carroll W. Litterman* Date *Aug 7, 1959*
 (Owner)

(11) WELL TESTS: Drawdown is amount water level is lowered below static level
 Was a pump test made? Yes No If yes, by whom? *Driller*
 Yield: *950* gal./min. with *10* ft. drawdown after *2* hrs.
 " " " " " "
 " " " " " "
 Bailer test gal./min. with _____ ft. drawdown after _____ hrs.
 Artesian flow _____ g.p.m. Date _____
 Temperature of water *54* Was a chemical analysis made? Yes No

(12) WELL LOG: Diameter of well *8* inches.
 Depth drilled *27* ft. Depth of completed well *27* ft.
 Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.

MATERIAL	FROM	TO
<i>Heavy Lean</i>	<i>0</i>	<i>1</i>
<i>SAND + GRAVEL</i>	<i>1</i>	<i>14</i>
<i>Yellow Clay</i>	<i>14</i>	<i>17</i>
<i>Light Sand + Gravel</i>	<i>17</i>	<i>21</i>
<i>SAND + Gravel + small gravel</i>	<i>21</i>	<i>27</i>

Work started *Aug 6* 19*59* Completed *Aug 7* 19*59*

(13) PUMP:
 Manufacturer's Name *FAIRBANKS MORSE 1 1/2" CENT.*
 Type: *CENTRIFUGAL* H.P. *26*

Well Driller's Statement:
 This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
 NAME *Bill Hamilton Drilling Co*
 (Person, firm, or corporation) (Type or print)
 Address *238 E 30th Ave Albany*
 Driller's well number *2*
 [Signed] *Bill Hamilton*
 (Well Driller)
 License No. *52* Date *Aug 7, 1959*