

WATER WELL REPORT
 MART...
 (1121)
 MAY

State Well No. 85/2W-28
 State Permit No. _____

(1) OWNER:
 Name Joseph B. F. Fummons
 Address 590-23 N.E. Salmon Ave

(2) TYPE OF WORK (check):
 New Well Deepening Reconditioning Abandon
 If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL: (4) PROPOSED USE (check):
 Rotary Driven Domestic Industrial Municipal
 Cable Jetted Irrigation Test Well Other
 Dug Bored

CASING INSTALLED:
 Threaded Welded
6" Diam. from 1 ft. to 67 ft. Gage 1250
 " Diam. from _____ ft. to _____ ft. Gage _____
 " Diam. from _____ ft. to _____ ft. Gage _____

PERFORATIONS:
 Perforated? Yes No.
 Type of perforator used _____
 Size of perforations in. by in.
 _____ perforations from _____ ft. to _____ ft.
 _____ perforations from _____ ft. to _____ ft.
 _____ perforations from _____ ft. to _____ ft.

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

(8) WELL TESTS:
 Drawdown is amount water level is lowered below static level
 Was a pump test made? Yes No If yes, by whom?
 Yield: gal./min. with ft. drawdown after hrs.
Air " " " "
Water test 30 gal./min. with 140 ft. drawdown after 1 hrs.
 Artesian flow g.p.m.
 Temperature of water Depth artesian flow encountered _____ ft.

(9) CONSTRUCTION:
 Well seal—Material used Cement
 Well sealed from land surface to 6.6 ft.
 Diameter of well bore to bottom of seal 9 in.
 Diameter of well bore below seal 6 in.
 Number of sacks of cement used in well seal 3 sacks
 Number of sacks of bentonite used in well seal _____ sacks
 Brand name of bentonite _____
 Number of pounds of bentonite per 100 gallons of water _____ lbs./100 gals.
 Was a drive shoe used? Yes No Plugs _____ Size: location _____ ft.
 Did any strata contain unusable water? Yes No
 Type of water? _____ depth of strata _____
 Method of sealing strata off _____
 Was well gravel packed? Yes No Size of gravel: _____
 Gravel placed from _____ ft. to _____ ft.

(10) LOCATION OF WELL:
 County Marion Driller's well number _____
 1/4 1/4 Section 28 T. S. R. 2, W. W.M.
 Bearing and distance from section or subdivision corner _____

(11) WATER LEVEL: Completed well.
 Depth at which water was first found 150 ft.
 Static level 125 ft. below land surface. Date 5-16-73
 Artesian pressure _____ lbs. per square inch. Date _____

(12) WELL LOG: Diameter of well below casing 6
 Depth drilled 270 ft. Depth of completed well 270 ft.
 Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level and indicate principal water-bearing strata.

MATERIAL	From	To	SWL
<u>RED-BROWN - Clay</u>	<u>0</u>	<u>28</u>	
<u>WITH BASALT-BLOCKS</u>			
<u>GRAY - Clay Stone</u>	<u>28</u>	<u>45</u>	
<u>RED - " "</u>	<u>45</u>	<u>51</u>	
<u>GREEN - " "</u>	<u>51</u>	<u>62</u>	
<u>BLUE - " "</u>	<u>62</u>	<u>110</u>	
<u>" - GRAY-SAND</u>	<u>110</u>	<u>235</u>	
<u>STONE</u>			
<u>Blue - Clay Stone</u>	<u>235</u>	<u>250</u>	
<u>" - " "</u>	<u>250</u>	<u>270</u>	
<u>WITH WHITE</u>			
<u>LIME Stone</u>			

Work started 5-14-1973 Completed 5-16-1973
 Date well drilling machine moved off of well 5-16-1973

Drilling Machine Operator's Certification:
 This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.
 [Signed] William West Date 5-21-1973
 (Drilling Machine Operator)
 Drilling Machine Operator's License No. 184

Water Well Contractor's Certification:
 This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
 Name William West
 (Person, firm or corporation) (Type or print)
 Address 5875 GAFFIN RD. S.E.
 [Signed] William West
 (Water Well Contractor)
 Contractor's License No. 37 Date 5-21-1973

For Official Use Only by The Oregon Water Resources Department:

Received Date:

County Well Log ID #

Well Identification Tag #

RECEIVED

Marion 11121

L-71212

APR 22 2004

L71212

WATER RESOURCES DEPT
SALEM, OREGON

WELL IDENTIFICATION APPLICATION FORM

INSTRUCTIONS ARE IN THE ACCOMPANYING "DEAR LANDOWNER" LETTER. FOR SHARED WELLS PLEASE SEE THE 3RD PARAGRAPH FROM THE TOP IN THE LETTER. Your ID Tag will be mailed out in approximately 10 days from the date we receive your application.)

****BUYER OR CURRENT LANDOWNER** (For the property that the well is located on. The Well ID tag will be sent to this address unless otherwise specified here.)

Landowner's or Buyer's Name: Donna & Parry Walborn

Mailing Address: 7727 Pine Tree Lane S.E.

City: Turner State: OR Zip: 97392 Phone: (503) 743-2935

****WELL LOCATION:**

County: Marion Well # _____ (if multiple wells exist on same property-ie: well #1,#2, etc.)

Township: 8.0 North of South (circle one) Range: 2.0 East or West (circle one) Section: 28 _____ 1/4 _____ 1/4 (If known)

Tax Lot # ~~082W28~~ 0700 Type of Well: water supply? domestic monitoring? _____ (Not the same as the tax acct. #) (Ex: domestic or irrigation use) (Ex: monitoring water for contaminants)

Address of Well: 7727 Pine Tree Lane S.E. Turner 97392
(Number) (Street) (City) (Zip)

(Optional): Does this well have a formal water right associated with it? Yes: _____ No: _____
(If unknown you may want to contact the Water Rights Group at 503-986-0945 for research)

If Yes: Application #: _____ Permit #: _____ Certificate #: _____

(Optional): Latitude _____ Longitude _____ (May sometimes be obtained from Well Log Report)

****WELL INFORMATION:** (Important note: If attaching a well log you obtained from our web-site please be certain that you have the correct log. Simply matching the tax lot number isn't enough. See attached instructions for assistance. If a well report is not available please complete as much of the following as possible, at a minimum the prior landowner names going back until around the time the well would have been drilled. Prior landowner names can be obtained from the County Assessor - see instructions.)

Start Card # from well log report if known: _____ Approx. Well Construction Date: _____

Well Constructor if known: _____

Name of Land Owner at Time of Construction (or prior landowners, going back in time to when well was constructed - contact your county assessor for list)

Well Depth (in feet): _____ Static Water Level (in feet): _____ Diameter of Exposed Well Casing (in inches): 6"

Please Return Completed Form to: Well ID Program, Oregon Water Resources Department
725 Summer St. NE, Suite A, Salem, OR 97301-1271, or fax to 503-986-0902 (App10-03)