NOTICE TO WATER WELL CONTRACTOR
The original and first copy of this report are to be filed with the

WATER RESOURCES DEPARTMENT,
SALEM, OREGON 97310
within 30 days from the date of well completion.

# WATER WELL REPORT
## STATE OF OREGON
(Please type or print)
(Do not write above this line)

MAR 1 1 1977
WATER RESOURCES DEPT.

MARI 14382
MAR 95/2W-24aa

State Well No. .....
State Permit No. .....

## (1) OWNER:
Name: Winston Miller
Address: 8638 Darly Road
Aumsville, Oregon 97325

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

## (3) TYPE OF WELL:
Rotary [ ] Driven [ ]
Cable [X] Jetted [ ]
Dug [ ] Bored [ ]

## (4) PROPOSED USE (check):
Domestic [X] Industrial [ ] Municipal [ ]
Irrigation [ ] Test Well [ ] Other [ ]

## CASING INSTALLED:
Threaded [ ] Welded [X]
6" Diam. from 0 ft. to 45 ft. Gage 250
" Diam. from ft. to ft. Gage
" Diam. from ft. to ft. Gage

## PERFORATIONS:
Perforated? [X] Yes [ ] No.
Type of perforator used: Torch Cut
Size of perforations: 1/8 in. by 6 in.
22 perforations from 35 ft. to 43 ft.
perforations from ft. to ft.
perforations from ft. to ft.

## (7) SCREENS:
Well screen installed? [ ] Yes [X] 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 [X] No If yes, by whom?
'd: gal./min. with ft. drawdown after hrs.
" " " "
" " " "
Bailer test 20 gal./min. with 25 ft. drawdown after 2 hrs.
Artesian flow g.p.m.
Temperature of water 51 Depth artesian flow encountered ft.

## (9) CONSTRUCTION:
Well seal—Material used: Cement
Well sealed from land surface to 20 ft.
Diameter of well bore to bottom of seal 10 in.
Diameter of well bore below seal 6 in.
Number of sacks of cement used in well seal 6 sacks
How was cement grout placed? hand mixed and hand placed
Was a drive shoe used? [X] Yes [ ] No Plugs Size: location ft.
Did any strata contain unusable water? [ ] Yes [X] No
Type of water? depth of strata
Method of sealing strata off
Was well gravel packed? [ ] Yes [X] No Size of gravel:
Gravel placed from ft. to ft.

## (10) LOCATION OF WELL:
County: Marion Driller's well number: 24377G
NE ¼ NE ¼ Section 24 T. 9S R. 2W W.M.
Bearing and distance from section or subdivision corner

## (11) WATER LEVEL: Completed well.
Depth at which water was first found 32 ft.
Static level 9 ft. below land surface. Date 3/4/77
Artesian pressure lbs. per square inch. Date

## (12) WELL LOG:
Diameter of well below casing 6"
Depth drilled 45 ft. Depth of completed well 45 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 |
|---|---|---|---|
| Top soil, sandy & rocky | 0 | 2 | |
| Small gravel & brown clay | 2 | 7 | |
| Lg. gravel & med. sand & | | | |
| Brown clay | 7 | 15 | 9 |
| Course sand & small gravel | 15 | 20 | |
| Med. gravel & sand-cemented | 20 | 32 | |
| Lg. gravel & med. sand | 32 | 45 | |

Work started 3/1/ 19 77 Completed 3/4/ 19 77
Date well drilling machine moved off of well 3/4/ 19 77

**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] George M. Simpson (Drilling Machine Operator) Date 3/8, 19 77
Drilling Machine Operator's License No. 1072

**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 Schoen's Electric & Pump (Person, firm or corporation) (Type or print)
Address 626 W. Queen Albany, Oregon 97321
[Signed] Larry E. Schoen (Water Well Contractor)
Contractor's License No. 513 Date 3/9, 19 77

(USE ADDITIONAL SHEETS IF NECESSARY)

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