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

JUN 22 1987

WATER RESOURCES DEPT.
SALEM, OREGON

(1) OWNER:
Name Bronc Brothers
Address 11984 Broadacres Rd. N.E.
City Hubbard State Oregon Zip 97032

(9) LOCATION OF WELL by legal description:
County Marion Latitude _____ Longitude _____
Township 5S N or S, Range 1W E or W, WM.
Section 4 NW 1/4 NE 1/4
Tax Lot _____ Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 17127 Hwy. 99E
Hubbard, Or 97032

(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

(10) STATIC WATER LEVEL:
34" ft. below land surface. Date 5/15/87
Artesian pressure _____ lb. per square inch. Date _____

(5) BORE HOLE CONSTRUCTION:
Depth of Completed Well 166' ft.
Special Standards date of approval _____

HOLE Diameter	From	To	SEAL		Amount
			Material	To	
6"	0	20	Benton	0	23 sacks
12"	20	166			

How was seal placed? Method A B C D E
 Other OAR 690-210-340
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(11) WELL LOG: Ground elevation _____

Material	From	To	WB?	SWL
Clay brown	0	38		
Clay grey	38	72		
Sand black	72	76		
Clay sandy	76	91		
Clay grey sticky	91	117		
Gravel & clay	117	118		
Clay & sand	118	124		
Gravel & sand	124	158		
Sand & gravel	158	161		
Gravel	161	164		
Clay	164	166		

(6) CASING/LINER:
Diameter From To Gauge Steel Plastic Welded Threaded
Casing: 12" +1 1/2" 166.250
Liner: _____
Final location of shoe(s) _____

Date started 4/22/87 Completed 5/15/87

(7) PERFORATIONS/SCREENS:
 Perforations Method Mills Knife
 Screens Type _____ Material _____
From To Slot size Number Diameter Tele/pipe size Casing Liner
1 163 3/8x3 768 _____

(unbonded) Water Well Constructor Certification:
I constructed this well in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.
Signed _____ Date 6-18-87

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min Pumping level Drill stem at Time
660 66' _____ 1/4 hr
660 68' _____ 1 hr
660 69' _____ 4 hrs.
900 93' _____ 6 hrs.
Temperature of water _____ 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: _____

(bonded) Water Well Constructor Certification:
I accept responsibility for construction of this well and its compliance with all Oregon water well standards. This report is true to the best of my knowledge and belief.
Signed Ivan Grossen Date 6-18-87
Company Grossen's Well Drilling Job No. 73