NOTICE TO WATER WEIR CONTACTOR V L U The original and first copy of this report The original and first copy of this report WATER WELL	REPORT OCA 1
water resources department salem, or water resources department.	
within 30 days from the ALEM, OREGON of well completion. OREGON (Do not write about	Permit No.
	(10) LOCATION OF HEILT
(1) OWNER:	(10) LOCATION OF WELL:
Name Keizer Witer District	County Wation Driller's well number
Address 64 Chemawa Kd. NE	1/4 Section 2 T. 73 R. 3W W.M.
SALM ONGON	Bearing and distance from section or subdivision corner
(2) TYPE OF WORK (check):	1s between Harcourt + Lowell Sts. approxi- mately 12 blocks South of Dearton Alle.
New Well Deepening Reconditioning Abandon In abandonment, describe material and procedure in Item 12.	
	(11) WATER LEVEL: Completed well.
(3) TYPE OF WELL: (4) PROPOSED USE (check):	Depth at which water was first found 65 ft.
Rotary Driven Domestic Industrial Municipal	Static level 8 ft. below land surface. Date UCT-1 1480
Bored Irrigation Test Well Other	Artesian pressure lbs. per square inch. Date
) CASING INSTALLED: Threaded Welded	(12) WELL LOG: Diameter of well below casing
7 Diam from +2 ft. to 210 ft. Gage . 250	Depth drilled 210 ft. Depth of completed well 210 ft.
	Formation: Describe color, texture, grain size and structure of materials;
	and show thickness and nature of each stratum and aquifer penetrated,
DEDECT ATTIONS.	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.
) PERFORATIONS: Perforated? Yes No.	MATERIAL From To SWL
36	Sandy Brown clay p' 4'
Size of perforations 78 in. by 372 in.	Brown Clay - Joylo 4 10
postore zeros	Sandy brown clay 10' 13'
perforations from ft. to ft	Small-medium a rave whine
periorations from	-Coarseblackabrown sand 13' 52' 18'
(7) SCREENS: Well screen installed? Yes No	Sand + gravely br. clay, 52, 55
Manufacturer's Name	Brown Clay w Line sand 55, 59
Type Model No.	Brown time - coarse sand total 37 10
Diam. Slot size Set from ft. to ft.	Rown clay 74 74 761
Diam. Slot size Set from ft. to ft.	Fine black sand ut some clay 79' 90'
(8) WELL TESTS: Drawdown is amount water level is lowered below static level	Small-med a chell Gue bo sound
a pump test made? Yes No If yes, by whom? Supply (6)	W some clay 90 106
1200 102 21	Blacket brown sander SM- Ires
rt. drawdown arter gan hrs.	arave 106 143 17/0 06
,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,	Brown Sandarane w anderce
	of cementation 143' 167' 15'S P
CT 1000	Brown sand + gravet w/ occasional ending &
esian flow g.p.m.	5 1 2/ 10 m 10 0 20 10 m
nperature of water Depth artesian flow encountered ft.	0.1.20 00
(9) CONSTRUCTION;	
Well seal-Material used Portland Cement	Drilling Machine Operator's Certification:
Well sealed from land surface toft.	This well was constructed under my direct supervision. Materials used and information reported above are true to my
Diameter of well bore to bottom of seal	best knowledge and belief.
Diameter of well bore below sealin.	[Signed] (Drilling Machine Operator) Date 190 U
Number of sacks of cement used in well seal sacks	Drilling Machine Operator's License No
How was cement grout placed? a grout pipe was placed he ween 12" + 16" casings. Grout mixture,	
of comenty water was pumped as casing (16")	Water Well Contractor's Certification:
inspetracted. An air grout nump was used.	This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief
Was a drive shoe used? □ Yes □ No Plugs Size: location ft.	MANG WARDONDWELL DOLLANG
Did any strata contain unusable water? Yes No	Name (Person, firm or corporation) (Type or print)
Type of water? depth of strata	Address 4962 REGAL DK. NE
Method of sealing strata off	[Signed [Michael Waldworf
Was well gravel packed? Yes No Size of gravel:	(Water Well Contractor)
Gravel placed from ft. to ft.	Contractor's License No. 653 Date 1100.5, 1980

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MARI 16776

OREGON HEALTH DIV'SION ONLY:

Received Date:

County Well Log ID #

9/18/00

MARI 16776 MARI 19701

WELL IDENTIFICATION LA BEL ATTACHMENT FORM (OREGON HEALTH DIVISION)

COMPANY /CURRENT WELL OWNER	OWNER (S) WELL NO: $\frac{\#6}{}$
Name: City of Keizer	
Mailing Address: P.O. Box 21000	
City: Keizer State: Of	2 Zi): 47307 Phone: (593) 390-3700
CONTACT PERSON:	
NAME: Joe Edgell	THONE # (503) 390-3700
THIS FORM IS ONLY T	TO BE USED FOR WELLS WITH
POSITIV	VELY IDENTIFIED
WATER SIID	PLY WELL REPORTS.
WAILKSUL	ILI WELL KEI OKIS.
	OFFICIAL USE ONLY
O.H.D.	
O.H.D. TOWNSHIP: 7—N (S) RANGE:	OFFICIAL USE ONLY B
O.H.D. TOWNSHIP: 7—N (\$) RANGE: Well Identification Label: L-32103 LABEL ATTACHED BY: Tom Patter	OFFICIAL USE ONLY B
O.H.D. TOWNSHIP: 7 N S RANGE:	OFFICIAL USE ONLY B = 1 (W) SECTION: 2 TAX-LOT: 4500 DATE: 8 / 18 / 00
O.H.D. TOWNSHIP: 7 N S RANGE:	OFFICIAL USE ONLY B
O.H.D. TOWNSHIP: 7 N S RANGE:	OFFICIAL USE ONLY B = 1 (W) SECTION: 2 TAX-LOT: 4500 DATE: 8 / 18 / 00