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.

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## waver wel6 report

STATE OF OREGON (Please type or print)

(Do not write above this line)



(10) LOCATION OF WELL: (1) OWNER: County WARION Driller's well number R. 3111 T. 75 Bearing and distance from section or subdivision corner 110. (2) TYPE OF WORK (check): Abandon | Reconditioning New Well [ Deepening 🗌 If abandonment, describe material and procedure in Item 12. (11) WATER LEVEL: Completed well. (4) PROPOSED USE (check): (3) TYPE OF WELL: Depth at which water was first found 30 ft. below land surface. Date Driven 🛚 Domestic 🗌 Industrial 🗍 Municipal 🗔 Jetted □ Irrigation | Test Well | Other lbs. per square inch. Date Artesian pressure Bored | (5) CASING INSTALLED: (12) WELL LOG: Threaded 🗌 Diameter of well below casing " Diam. from ft. Depth of completed well Depth drilled Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, ft to 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. Perforated? Tes SWL Vinte Size of perforations Horland cement w perforations from I SACK CEMENT perforations from owno was used (7) SCREENS: Well screen installed? Yes Manufacturer's Name ..... Set from ..... Diam. ..... Slot size ..... Drawdown is amount water level is lowered below static level (8) WELL TESTS: a pump test made? 

Yes 

No If yes, by whom? ft. drawdown after hrs. gal./min. with Yield: <del>OCT 2 4|1980</del> ,, WATER RESOURCES gal./min. with ft. drawdown after hrs. SALEM. OREGON er test irtesian flow g.p.m. Depth artesian flow encountered . Temperature of water Date well drilling machine moved off of well (9) CONSTRUCTION: 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 Analysis Date 8-27 19 80 Well seal-Material used ... Well sealed from land surface to Diameter of well bore to bottom of seal ..... raldioof Date 8-27, 1910 Diameter of well bore below seal .... Number of sacks of cement used in well seal ..... Drilling Machine Operator's License No. 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 MIKE WALDROOP WELL DRILLING Was a drive shoe used? 

Yes 

No Plugs ...... Size: location ...... (Type or print) Did any strata contain unusable water? 

Yes 

No depth of strata Type of water? Method of sealing strata off (Water Well Contractor) Was well gravel packed? [] Yes [] No Size of gravel: Contractor's License No. 633 Date Gravel placed from .....

## OREGON HEALTH DIVISION ONLY: Received Dates County Well Log ID # 4/18/00 MARTILARIA MARI 16772 WELL IDENTIFICATION LABEL ATTACHMENT FORM (OREGON HEALTH DIVISION) OWNER (S) WELL NO: #4 COMPANY/CURRENT WELL OWNER: Name: City of Keizer Mailing Address: P.O. Box 21000 City: Keizer State: OR Zip: 97307 Phone: (503)390-3700 CONTACT PERSON: NAME: Joe Edgell PHONE # (603) 390-3700 THIS FORM IS ONLY TO BE USED FOR WELLS WITH POSITIVELY IDENTIFIED WATER SUPPLY WELL REPORTS. O.H.D. OFFICIAL USE ONLY TOWNSHIP: 7 N/S RANGE: 3 E W SECTION: 2 TAX-LOT: 200 Well Identification Label: L- 32101 DATE: 8/18/00 CABELATTACHED BY: Tom Pattee O.H.D. OFFICIAL ) (WATER SUPPLY WELL REPORT MUST BE ATTACHED!) Please Return Completed Form to: Larry D. McQueen Well Identification Program Oregon Water Resources Department 158 12th Street NE

Salem, OR 97310

DM/WRD/OHD