

#16

Mark  
17066

6S/2W/33AC

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

(START CARD) # 25186

(1) OWNER: Well Number: 2908  
Name ROBERT BRAMMEIER  
Address 6014 Hazelgreen Rd. N.E.  
City Salem, OR 97305 State Zip

(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

(5) BORE HOLE CONSTRUCTION:  
Special Construction approval Yes No Depth of Completed Well 140 ft.  
Explosives used Yes No  Type Amount

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
14	0	19	Dry Bentonite	0	19	1025 pounds
8	0	14				

How was seal placed: Method  A  B  C  D  E  
 Other As Per 690-210-340  
Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Size of gravel \_\_\_\_\_

(6) CASING/LINER:

Casing/Liner	Diameter	From	To	Gauge	Steel				Welded		Threaded	
					Steel	Plastic	Welded	Threaded	Welded	Threaded	Welded	Threaded
Casing	8"	+1	140	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 140'

(7) PERFORATIONS/SCREENS:

Perforations Method Mills Knife (2 1/2" x 3/8")  
 Screens Type Material

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
123	140		208			<input checked="" type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour

Pump  Bailer  Air  Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
150+		140	1 hr.

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: \_\_\_\_\_

(9) LOCATION OF WELL by legal description:  
County Marion Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 6S N or S, Range 2W E or W, WM.  
Section 33 SW 1/4 NE 1/4  
Tax Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) 6014 Hazelgreen Rd. N.E.

(10) STATIC WATER LEVEL:  
45 ft. below land surface. Date 11/16/90  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found 53

From	To	Estimated Flow Rate	SWL
53	140	300+	45'

(12) WELL LOG: Ground elevation \_\_\_\_\_

Material	From	To	SWL
Topsoil	0	2	
Brpwn Clay	2	53	
Muddy Barown Sand and Some			
<del>XXXXX</del> Gravel	53	74	
Brown Sand and Gravel and			
Brown Clay	74	95	
Sandy Black Sand and Gravel			
W/blue Clay	95	115	
Black Sand and Gravel, Blue	115		
Clay		122	
Black Sand and Gravel	122	140	

DEC 03 1990

WATER RESOURCES DEPT.  
SALEM, OREGON

Date started 11/16/90 Completed 11/16/90

(unbonded) Water Well Constructor Certification:  
I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.  
Signed Mark D. Bein WWC Number 753 Date 11/20/90

(bonded) Water Well Constructor Certification:  
I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. all work performed during this time is in compliance with Oregon well construction standards. This report is true to the best of my knowledge and belief. WILLAMETTE DRILLING CO. WWC Number 753  
Signed Mark D. Bein Date 11/20/90