

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

*AMENDED
 1/2/91*

MAR 27 1991

85/2w/30

WATER RESOURCES DEPT. (START CARD) #

18731

(1) OWNER: **G & C Farms** Well Number: _____
 Name _____
 Address **4196 81st Ave NE**
 City **Salem Ore** State _____ Zip **97305**

(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 **540** ft.
 Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
8"	510	540	Existing			

How was seal placed: Method A B C D E
 Other _____
 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	Material			
					Steel	Plastic	Welded	Threaded
Casing: Existing					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
None							

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
 Yield gal/min **500 ±** Drawdown **Full** Drill stem at **540'** Time **1 hr.**

Temperature of water **60°** 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 **8** N or S Range **2** E or W W.M.
 Section **30** ¼ _____ ¼ _____
 Tax Lot **51150-000-90** Block _____ Subdivision _____
 Street Address of Well (or nearest address) **4196 81st Ave NE**

(10) STATIC WATER LEVEL:
46 ft. below land surface. Date **Jan 25 90**
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL

(12) WELL LOG: Ground elevation **200 ±**

Material	From	To	SWL
Existing well 510'			
Cleaned & Re Developed to Existing Depth			
Hard Dark gray Basalt Broken	510	540	

MAR 12 1991
 WATER RESOURCES DEPT.
 SALEM, OREGON

Log held for Pump Testing
 Pump Not Replaced as of 2/28/91

Date started **Jan 25** Completed **Jan 28 91**

(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.
 WWC Number _____
 Signed _____ Date _____

(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.
 WWC Number **1281**
 Signed **John S. Abernathy** Date _____