

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

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(START CARD) # 39080

WATER RESOURCES DEPT.
 SALEM, ORE.

(1) OWNER:
 Name James J.W. Hoover
 Address 3399 Vitae Springs Rd.S.
 City Salem State Ore. Zip 97306

(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 118 ft.
 Explosives used Yes No Type _____ Amount _____

Diameter	HOLE		Material	SEAL		Amount sacks or pounds
	From	To		From	To	
10"	0	40	Cement	25	40	4 sak
6"	40	118	Bentonite	0	25	12 sak

How was seal placed: Method A B C D E
 Other And Poured Dry Bentonite
 Backfill placed from _____ ft. to _____ ft. Material _____
 Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 6"	#1	40	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 4 1/2"	#1	118	160	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:
 Perforations Method Saw Cut
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
80'	117'	1/8	76	6" long		<input type="checkbox"/>	<input checked="" type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
75 GPM		118	1 hr.

Temperature of Water 52° 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 8S N. or S. Range 3W E or W. WM. _____
 Section 18 SE SE
 Tax Lot 600 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) Same

(10) STATIC WATER LEVEL:
28' ft. below land surface. Date 5-26-92
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL
60	90	6 GPM	
90	118	75 GPM	

(12) WELL LOG:
 Ground elevation _____

Material	From	To	SWL
Soil	0	1	
Orange Brown Clay	1	23	
Weathered Rock To Hard	23	40	
Rock Partly Broken Layers	40	118	

**ROBINSON DRILLING
 WELLS & PUMPS**
 4520 Dallas-Salem Hwy.
 Salem, Ore. 97304
 371-1844

Date started 5-14-92 Completed 5-26-92

(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 _____ WWC Number _____
 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.
 Signed George Robinson WWC Number _____
 Date _____