

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

MAR 1 18235 DEC - 3 1992

WATER RESOURCES DEPT
SALEM, OREGON

(START CARD) # 43205

65/1w/26bd

(1) OWNER: Well Number _____
Name Pembroke Farms
Address 7017 Quarry Ave
City Silverton State OR Zip 97381

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

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
14	0	23	cement	0	21	16
			bentonite	21	23	2
10	23	248				
underream	248	265	cement	248	265	10

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:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 10	+1	265	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: none				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 265

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

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	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"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
500	—	530	1 hr.
400	—	350	
350	—	280	

Temperature of Water 58 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 6 S N or S. Range 1 W E or W. WM. _____
Section 26 SE 1/4 NW 1/4 _____
Tax Lot 1066 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) _____
Same as Mailing

(10) STATIC WATER LEVEL:
88 ft. below land surface. Date 11-30-92
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 66

From	To	Estimated Flow Rate	SWL
465	470	80	88
480	496	250	88
496	530	500	88

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
top soil	0	1	
clay brown medium	1	10	
conglomerate large tight	10	58	
gravel with gray clay	58	66	
conglomerate	66	89	
gravels with brown clay	89	110	
conglomerate	110	128	
clay gray sticky	128	142	
conglomerate	142	156	
clay brown	156	194	
clay red	194	212	
claystone yellow	212	236	
claystone blue	236	248	
soft rock lavender	248	258	
basalt gray coarse hard grain	258	293	
basalt medium gray slightly weathered	293	308	
basalt gray hard	308	323	
basalt gray medium claystone with blue streaks	323	339	
basalt gray hard	339	407	

(CONTINUES ON NEXT PAGE)
Date started 11-20-92 Completed 11-30-92

(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 Byron B. Staller WWC Number 1358
Date 12-1-92

(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 [Signature] WWC Number 703
Date 12-1-92

