

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

MARI RECEIVED
 18546
 JUL 14 1993

58/2w/3dc
 (START CARD) # 42814

(1) OWNER: Well Number WATER RES
 Name Charles & Ellen Johnston SALEM,
 Address 17425 Arbor Grove Rd NE
 City Woodburn State OR Zip 97071

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

HOLE		SEAL		Amount sacks or pounds
Diameter	From To	Material	From To	
16"	0 20	Cement	0 20	27 sacks
12"	20 142			

How was seal placed: Method A B C D E
 Other _____

Backfill placed from _____ ft. to _____ ft. Material _____
 Gravel placed from 119 ft. to 142 ft. Size of gravel 6-9 colorado

(6) CASING/LINER: silica

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 12"	+2'	118'9"	.250k	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 118'9"

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

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
±29"	120'			10"	pipe	<input checked="" type="checkbox"/>	<input type="checkbox"/>
120'	138'	.060		10"	screen	<input type="checkbox"/>	<input type="checkbox"/>
138'	142'			10"	pipe	<input checked="" type="checkbox"/>	<input type="checkbox"/>
142'	Bottom plate					<input type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
500	93'		1 hr.
450	89'		3 hrs
450	90½'		6 hrs

Temperature of Water 53 degrees 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: _____

URCES DEPT. LOCATION OF WELL by legal description:
 County Marion Latitude _____ Longitude _____
 Township 5S N or S. Range 2W E or W. WM. _____
 Section 3 SW ¼ SE ¼
 Tax Lot 00100 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) 17425 Arbor Grove Rd. Woodburn, OR 97071

(10) STATIC WATER LEVEL:
18'6" ft. below land surface. Date 7/2/93
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found 99'

From	To	Estimated Flow Rate	SWL
99	103	40 gpm	18½'
120	138	450 gpm	18½'

(12) WELL LOG:
 Ground elevation _____

Material	From	To	SWL
Top soil	0	2	
Clay brown	2	23	
Clay brown sandy	23	25	
Clay grey	25	66	
Clay grey silty	66	85	
Clay grey sandy	85	86	
Clay grey silty	86	92	
Sand, clay grey	92	99	18'6"
Sand, gravel	99	103½	
Clay grey	102½	116	
Clay grey sandy	116	120½	
Sand, clay grey	120½	127	18'6"
Sand black, gravel	127	138'	18'6"
Clay grey sticky	138	142	

Date started 5/20/93 Completed 7/2/93

(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 Kenneth S. Williams WWC Number 1582
 Date 7-12-93

(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 Ivan Gossen WWC Number 783
 Date 7/12/93