

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

RECEIVED

DEC - 8 1993

(START CARD) # 53810

Mari 18805

58/2w/23ac

(1) OWNER:
 Name Frank Buck
 Address P.O. Box 217
 City Woodburn State OR Zip 97071

Well Number _____
SALEM, OREGON

WATER RESOURCES DEPT.

(9) LOCATION OF WELL by legal description:
 County Marion Latitude _____ Longitude _____
 Township 5S N or S. Range 2W E or W. WM. _____
 Section 23 SW 1/4 NE 1/4
 Tax Lot 44351-000 Block _____ Subdivision _____
 Street Address of Well (or nearest address) 14166 Butteville Rd. NE Gervais, OR 97026

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

HOLE		SEAL		Amount
Diameter	From	To	Material	sacks or pounds
16"	0	22	cement & 20% bentonite	2400lbs
12"	22	183	lbs bentonite	480

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: 12"	+1'9"	166'	.250	<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) 166'

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

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
146	161'6"	1/2x2	500			<input checked="" type="checkbox"/>	<input type="checkbox"/>
162	162'8"	Neoprene packer				<input type="checkbox"/>	<input type="checkbox"/>
162'8"	166			10"	pipe	<input type="checkbox"/>	<input type="checkbox"/>
166'	181'	.016		10"	p.s.	<input type="checkbox"/>	<input type="checkbox"/>
181	183			10"	pipe w/cement plug	<input 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
520	61		1 hr.
520	63		5 hrs.

Temperature of Water 53 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: _____

(10) STATIC WATER LEVEL:
31' ft. below land surface. Date 11/8/93
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found 72'

From	To	Estimated Flow Rate	SWL
72'	86'		31
98'	137'6"		31
138'6"	140'6"		31

(12) WELL LOG:
 Ground elevation _____

Material	From	To	SWL
Topsoil	0	2	
Clay brown sandy	2	23	
Clay grey sandy	23	50	
Clay grey	50	72	
Clay grey, sand	72	86	31
Clay grey	86	98	
Clay grey, sand	98	122	31
Clay grey, sand, gravel	122	133	31
Gravel, sand black	133	137'6"	31
Clay grey	137'6"	138'6"	
Gravel, sand black	138'6"	140'6"	31
Clay grey	140'6"	145	
Gravel, sand, silt	145	148	
Gravel, sand	148	162	
Sandstone black	162	169	
Sand black	169	183	

Date started 9/16/93 Completed 11/10/93

(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.
 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 783
 Signed Luan Grossan Date 12/1/93