STATE OF OREGON

WATER WELL REPORT

(as required by ORS 537.765)

8S/2W/26

(START CARD) # 70075

(1) OWNER:

Well Number 1

Name James & Nancy Lawrence

Address 3250 Bell Rd NE

City Salem State Zip 97301

(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 102 ft.

Explosives used ☐ Yes ☑ No Type _____ Amount _____

HOLE Diameter	From	To	SEAL Material	From	To	Amount sacks or pounds
6"	39	102	cement	38	0	12 Sak
10"	0	38				

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:	6"	+1	39'	250	☑	☐	☑	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:	4"	4	102	160	☐	☑	☑	☐
					☐	☐	☐	☐

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
62'	102	1/8	46	6" T on E		☐	☑
						☐	☐
						☐	☐
						☐	☐
						☐	☐

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

☐ Pump ☐ Bailer ☑ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
15 GPM		100'	1 hr.
15 GPM		80'	2 hrs

Temperature of Water 54° 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 S N or S. Range 2 W E or W. WM.

Section 2 NW ¼ NW ¼

Tax Lot _____ Lot _____ Block _____ Subdivision _____

Street Address of Well (or nearest address) 82 nd & Darling

(10) STATIC WATER LEVEL:

4' ft. below land surface. Date 3/1/95

Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL
78	102	15 GPM	

(12) WELL LOG:

Ground elevation _____

Material	From	To	SWL
Boulders / Brown clay	0	14	
Rock	14	19	
Tuff stone pink / gray	19	20	
Weatherd Rock	20	23	
Tuff stone gray	23	26	
Rock	26	102	

RECEIVED

MAR 0 2 1995

WATER RESOURCES DEP
SALEM, OREGON

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

Date started 2/24/95 Completed 3/1/95

(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 13

Signed George Robinson Date 3-2-95

ORIGINAL & FIRST COPY - WATER RESOURCES DEPARTMENT SECOND COPY - CONSTRUCTOR THIRD COPY - CUSTOMER 9809C 10/91