

RECEIVED
MAR 20 1995
WATER RESOURCES D
Well No. 1
SALEM, OREGON

RECEIVED
OVER THE COUNTER
(START CARD) # 095/03W/24DB
68873

(9) LOCATION OF WELL by legal description:

Name MILDRED WRIGHT SALEM, OREGON
Address 3025 EDGEWOOD DR.
City JEFFERSON State ORE Zip 97352

☒ New Well ☐ Deepen ☐ Recondition ☒ Abandon

☒ Rotary Air ☐ Rotary Mud ☐ Cable
☐ Other _____

☒ Domestic ☐ Community ☐ Industrial ☐ Irrigation
☐ Thermal ☐ Injection ☐ Other _____

Special Construction approval ☐ Yes ☒ No Depth of Completed Well 0 ft.
Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
6"	0'	55	CEMENT	0'	515	96 SACKS
			5% BENTONITE			

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E
☒ Other CEMENT BUCKET - BOTTOM U.P.

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:					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

☐ Perforations Method N/A

☐ Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						☐	☐
						☐	☐
						☐	☐
						☐	☐
						☐	☐

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

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
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09pm	N/A	515'	1 hr.

Temperature of Water N/A Depth Artesian Flow Found

Was a water analysis done? NO Yes By whom

Did any strata contain water not suitable for intended use? ☐ Too little
☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other NONE

Depth of strata:

County MURKIN Latitude _____ Longitude _____
Township 9S N or S. Range 3W E or W. WM. _____
Section 24 NW $\frac{1}{4}$ SE $\frac{1}{4}$ _____
Tax Lot 62570-626 Block _____ Subdivision _____
Street Address of Well (or nearest address) SAME AS

(10) STATIC WATER LEVEL:

_____ ft. below land surface. *274* Date _____
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found N/A

From	To	Estimated Flow Rate	SWL

(12) WELL LOG:

Ground elevation _____

[illegible]

Date started 8-14-95 Completed 9-16-95

(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.

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.

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Signed James H. Saeed WWC Number 1274
Date 10-14-95