

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

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MAR 21 1980

55/1W-35 dc

(1) OWNER:

Name Fessler Farms

Address 11796 Monitor-Mountain Rd
 City Woodburn

(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 _____

BORE HOLE CONSTRUCTION:

Special Construction approval Yes No Depth of Completed Well 631 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE		SEAL		Amount sacks or pounds
Diameter	From To	Material	From To	
4"	0 20	Bent.	0 20	29
10"	20 440			
13"	435 440	cement	435 440	7 sacks

How was seal placed: Method A B C D E
 Other pounded in dry

Backfill placed from _____ ft. to _____ ft. Material _____
 Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Casing/Liner	Diameter	From	To	Gauge	Steel		Plastic		Welded		Threaded	
					✓	□	□	□	□	□	□	□
Casing:	10	+1	440	250	✓	□	□	□	□	□	□	□
Liner:	NA				□	□	□	□	□	□	□	□

Location of shoe(s) 440

(7) PERFORATIONS/SCREENS:

Perforations Method NA
 Screens Type _____ Material _____

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

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

Pump Bailor Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
est. 500		630	2
			1 hr.

Temperature of water NA Depth Artesian Flow Found NA
 Was a water analysis done? Yes No By whom NO
 Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other NA
 Depth of strata: NA

LOCATION OF WELL by legal description:

County Marion Latitude _____ Longitude _____
 Township 5S Nor S. Range 1W E or W, WM.
 Section 35 SW 1/4 SE 1/4
 Tax Lot _____ Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) 1 mile east of 214 on Dominic Rd. no address

(10) STATIC WATER LEVEL:

130 ft. below land surface. Date 9-9-87
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 32 ft.

From	To	Estimated Flow Rate	SWL
32	41	5 to 10 gpm	21
460	465	25	NA
560	570	est. 100 gpm	
570	585	400	130

(12) WELL LOG:

Ground elevation NA

Material	From	To	SWL
Top soil	0	1	
Brown & gray silty clay	1	32	
Brown silty clay gravel	32	41	21
Blue gray clay	41	70	
Green sticky clay	70	88	
Brown sticky clay	88	97	
Blue gray clay	97	105	
Brown sticky clay few gravel	105	118	
Blue gray clay	118	173	
Sticky gray clay	173	221	
Blue sticky clay	221	268	
Silty gray clay	268	271	
Green sticky clay	271	296	
Gray silt	296	352	
Gray & brown clay	352	385	
Brown silty clay large amount of wood	385	403	
Sticky green clay	403	413	
Blue gray clay	413	431	
Green shale	431	435	
Black rock hard	435	440	
Basalt black hard	440	450	
Basalt fractured	450	465	

Date started 6-1-87 Completed 9-9-87

(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 Donald Johnson WWC Number 1310
 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.

Signed Chick WWC Number 723
 Date 9-1-87

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Pg. 2B2 55/1W-35dc

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

SEP 14 1987

(1) OWNER: Name Fessler Farms Address 11796 Monitor-Mckee Rd., NE City Woodburn State OR Zip 97071

WATER RESOURCES DEPT. SALEM, OREGON

(9) LOCATION OF WELL by legal description: County _____ Latitude _____ Longitude _____ Township _____ Nor.S, Range _____ E or W, WM. Section _____ 1/4 _____ 1/4 Tax Lot _____ Lot _____ Block _____ Subdivision _____ Street Address of Well (or nearest address) _____

(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 _____

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

BORE HOLE CONSTRUCTION: Special Construction approval Yes No Depth of Completed Well _____ ft. Explosives used [] [] Type _____ Amount _____

(11) WATER BEARING ZONES: Table with columns: From, To, Estimated Flow Rate, SWL

Table with columns: HOLE meter, From, To, SEAL Material, From, To, Amount sacks or pounds

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 _____

(12) WELL LOG: Table with columns: Material, From, To, SWL. Includes entries like Basalt w/claystone frac., Basalt, Fractured basalt w/claystone & cinders, Basalt vesiclr w/clystn, Blue & black basalt grey vesicular, Basalt black w/fracture. Methods: cable tool, rotary. Date started 6-1-87, Completed 9-9-87

(6) CASING/LINER: Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Includes Casing and Liner rows.

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

Table with columns: 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 1 hr.

(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. Signed Donald V. Johnson WWC Number 1310 Date _____

Temperature of water _____ 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: _____

(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. Signed _____ WWC Number 723 Date 9-11-87