

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

MAR 22 1989 2242

55/2w/2ac

(START CARD) # 8659

(1) OWNER: Well Number: 2821
 Name TERRY KEILING
 Address 17049 Mt. View Lane N.E.
 City Woodburn, Oregon State 97071 Zip _____

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

HOLE		SEAL		Material	From	To	Amount sacks or pounds
Diameter	From To	From	To				
10	0 19	Bentonite	0	19	450 pounds		
6	0 127						

How was seal placed: Method A B C D E
 Other As Per 690-210-340
 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"	0	127	.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) 127'

(7) PERFORATIONS/SCREENS:

Perforations Method Torch
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
125	127	1/2"	8			<input checked="" type="checkbox"/>	<input type="checkbox"/>
		X 8"				<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
100+	83	127	1 hr.

Temperature of water _____ Depth Artesian Flow Found _____
 Was a water analysis done? Yes No 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 5S Nor S, Range 2W E or W, WM.
 Section 2 SW 1/4 NE 1/4
 Tax Lot _____ Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) _____
17049 Mt. View Lane N.E. Woodburn, OR

(10) STATIC WATER LEVEL:
44 ft. below land surface. Date 7/10/89
 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	127	100+	44

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
Topsoil	0	2	
Brown Clay	2	23	
Gray Clay	23	72	
Black Sand	72	101	
Blue Clay	101	114	
Brown Sand	114	118	
Brown Sand and Gravel	118	127	44

RECEIVED
 AUG 4 1989
 WATER RESOURCES DEPT.
 SALEM, OREGON

Date started XXI 7/10/89 Completed 7/10/89

(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 Mark D. Beier WWC Number 753
 Date 7/10/89

(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. Willamette Drilling co. WWC Number 753
 Signed Mark D. Beier Date 7/10/89

MARI 2242
For Official Use Only:

Received Date:

4-29-98

County Well Log ID #

MARI 2242

Well Identification Tag #

24692

WELL IDENTIFICATION APPLICATION FORM

* Tagged Dicked
up by Realtor
4-29-98

BUYER/CURRENT WELL OWNER:

Name: Terry Kieling

Mailing Address: 17049 Mtn. View Ln. NE

City: Woodburn State: OR Zip: 97071 Phone: _____

WELL LOCATION:

County: Marion Owner's Well Number: _____

Township: 5 N of S, Range: 2 E of W, Section: 2 1/4 SE 1/4

Tax Lot Number: 3400 Type of Well: water supply monitoring

Street Address of Well (if different from above): 17049 Mtn View Ln NE

Woodburn 97071

WELL INFORMATION: (do not complete remainder of application if well log is available)

Start Card Number: _____ Approx. Construction Date: _____

Well Constructor: N/A

Name of Owner at Time of Construction: _____

Well Depth (in feet): _____ Static Water Level (in feet): _____

Diameter of Exposed Well Casing (in inches): _____

Does this well have a formal water right associated with it? Yes: _____ No: _____

If Yes: Application #: _____ Permit #: _____ Certificate #: _____

Please Return Completed Form to:

Lisa Juul
Well Identification Program
Oregon Water Resources Department
158 12th Street NE
Salem, OR 97310