

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

MARI  
 50190

95/2w/34 88  
 (START CARD) # 82064

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NOV 20 1996

Instructions for completing this report are on the last page of this form. Page 1 of 2

(1) OWNER: Well Number \_\_\_\_\_

Name Monisette  
 Address 6487 Stayton Rd SE  
 City Turner State OR Zip 97392

(2) TYPE OF WORK  
 New Well  Deepening  Alteration (repair/recondition)  Abandonment

(3) DRILL METHOD:  
 Rotary Air  Rotary Mud  Cable  Auger  
 Other \_\_\_\_\_

(4) PROPOSED USE:  
 Domestic  Community  Industrial  Irrigation  
 Thermal  Injection  Livestock  Other \_\_\_\_\_

(5) BORE HOLE CONSTRUCTION:  
 Special Construction approval  Yes  No Depth of Completed Well 262.5 ft.  
 Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
14"	0	26	Cement	0	4	10
			Bentonite	4	26	22
10"	26	262	Cement	87	97	13

How was seal placed: Method  A  B  C  D  E

Backfill placed from 104 ft. to 97 ft. Material pea gravel  
 Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Size of gravel \_\_\_\_\_

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 10	1	93	.305	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8	83	262	.25	<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) 93'

(7) PERFORATIONS/SCREENS:

Perforations Method factory perf  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
112	140	.187	448	8		<input checked="" type="checkbox"/>	<input type="checkbox"/>
160	185	.187	400	8		<input checked="" type="checkbox"/>	<input type="checkbox"/>
195	262.5	.187	1072	8		<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
720		80	1 hr.

Temperature of water 56 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: SALEM, OREGON

County Marion Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
 Township 9S N or S Range 2W E or W. WM. \_\_\_\_\_  
 Section 34 NW 1/4 NW 1/4 \_\_\_\_\_  
 Tax Lot 00100 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) same as mailing

(10) STATIC WATER LEVEL:  
4.4 ft. below land surface. Date 1/24/96  
 Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:  
 Depth at which water was first found 4

From	To	Estimated Flow Rate	SWL
34.5	69	50	3.5
103	262.5	720	4.4

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(12) WELL LOG: Ground Elevation \_\_\_\_\_ WATER RESOURCES DEPT. SALEM, OREGON

Material	From	To	SWL
Top soil	0	2	
Brown Dirt	2	4	
Cobbles & gravels brn clay	4	31.5	
Wthrd coarse gravels & sand	34.5	40	WB
Course gravel & brwn clay med	40	49	
Med & coarse gravels	49		
loosely cemented		69	
Brn clay med	69	87	
Green clay sticky	87	95	
Brn clay silty	95	103	
med & course sand w/ gravel	103	110	WB
Brn gravels tightly cemented	110	113	
Brn gravels loosely cemented	113	145	
Sand med course some gravels	145	155	
Brn sand stone gravel	155		
Conglomerate		189	
Brn silt + soft	189	191	

CONTINUED

Date started \_\_\_\_\_ Completed \_\_\_\_\_

(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 water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.

Signed Jelly M. G. Long WWC Number 1672  
 Date 1-16-96

(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 water supply well construction standards. This report is true to the best of my knowledge and belief.

Signed Ryan B. Stables WWC Number 1358  
 Date 2-15-96

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

95/RW/34BB

(START CARD) # \_\_\_\_\_

Page 2 of 2

Instructions for completing this report are on the last page of this form.

(1) OWNER: Well Number \_\_\_\_\_

Name Morissette  
 Address 6487 Stayton Rd SE  
 City Turner State OR Zip 97392

(2) TYPE OF WORK  
 New Well  Deepening  Alteration (repair/recondition)  Abandonment

(3) DRILL METHOD:  
 Rotary Air  Rotary Mud  Cable  Auger  
 Other \_\_\_\_\_

(4) PROPOSED USE:  
 Domestic  Community  Industrial  Irrigation  
 Thermal  Injection  Livestock  Other \_\_\_\_\_

(5) BORE HOLE CONSTRUCTION:  
 Special Construction approval  Yes  No Depth of Completed Well \_\_\_\_\_ ft.  
 Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	

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:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) \_\_\_\_\_

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Diameter	Material	Tele/pipe size	Casing	Liner
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

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

<input type="checkbox"/> Pump	<input type="checkbox"/> Bailer	<input type="checkbox"/> Air	<input type="checkbox"/> Flowing Artesian
Yield gal/min	Drawdown	Drill stem at	Time
			1 hr.

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: \_\_\_\_\_

(9) LOCATION OF WELL by legal description:  
 County Marion Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
 Township 9S N or S Range 2W E or W. WM.  
 Section 34 NW 1/4 NW 1/4  
 Tax Lot 00100 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) same as mailing

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

(11) WATER BEARING ZONES:  
 Depth at which water was first found \_\_\_\_\_

From	To	RECEIVED	SWL
		NOV - 3 1998	
		WATER RESOURCES DEPT.	
		SALEM, OREGON	

(12) WELL LOG:  
 Ground Elevation \_\_\_\_\_

Material	From	To	SWL
Wthrd Siltstone	191	197	
Cemented sand	197		
Gravels brn		230	
med gravels loosely	230		
Cemented		239	
Gravels. lghtly cemented	239	250	
Gravels loosely cemented	250	262.5	

From	To	RECEIVED	SWL
		FEB 21 1996	
		WATER RESOURCES DEPT.	
		SALEM, OREGON	

Date started 12/19/95 Completed 1/24/96

(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 water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.  
 WWC Number 1672  
 Signed Jerry J. G... Date 2-16-96

(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 water supply well construction standards. This report is true to the best of my knowledge and belief.  
 WWC Number 1354  
 Signed Dyn B. ... Date 2-15-96