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RECEIVED

WELL I.D.# L10563

STATE OF OREGON  
WATER SUPPLY WELL REPORT

JUN - 9 1997

(START CARD) # 95669

(as required by ORS 537.765)

WATER RESOURCES DEPT.

Page 1 of 2

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

(1) OWNER:

Well Number \_\_\_\_\_

Name Myrtle Mikkelsen  
Address 1098 Pine Street  
City Silverton State OR Zip 97381

(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 498 ft.  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE

SEAL

Diameter	From	To	Material	From	To	Sacks or pounds
<u>16</u>	<u>0</u>	<u>25</u>	<u>Cement</u>	<u>0</u>	<u>25</u>	<u>85 SACKS</u>
<u>12</u>	<u>25</u>	<u>48</u>	<u>Cement</u>	<u>25</u>	<u>48</u>	<u>7 SACKS</u>

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: <u>12</u>	<u>+1</u>	<u>292</u>	<u>25</u>	<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) 292

(7) PERFORATIONS/SCREENS:

N/A

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

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

Yield gal/min	Drawdown	Drill stem at	Time
<u>650</u>		<u>495</u>	<u>1 hr.</u>
<u>425</u>		<u>210</u>	

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:

County Marion Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 65 N or S Range 14 E or W. WM.  
Section 28 SW 1/4 SE 1/4  
Tax Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) Same as Mailing

(10) STATIC WATER LEVEL:

52 ft. below land surface. Date 5/27/97  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found 23

From	To	Estimated Flow Rate	SWL
<u>370</u>	<u>397</u>	<u>75</u>	
<u>401</u>	<u>493</u>	<u>50</u>	
<u>493</u>	<u>498</u>	<u>525</u>	

(12) WELL LOG:

Ground Elevation \_\_\_\_\_

Material	From	To	SWL
Top soil	0	1	
Silty clay brn	1	18	
Clay Silty gray	18	23	
Cobbles blk hard	23	32	WB
Sands silty Lt gray	32	34	
Gravels silty brn	34	37	
Packed sands gravels whtd	37	43	
Gravels Sand med	43	54	
Gravels Silty gray	54	110	
Silty clay & gravels	110	157	
Silty clay brn	157	235	
Clay Blue sticky	235	261	
Sandstone green	261	274	
Basalt frac black hrd	274	276	
Sandstone gray med	276	279	
Basalt gray med	279	332	
Claystone blk/brn strat	332	354	
Basalt gray hard	354	370	

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 [Signature] WWC Number 1672  
Date 6/5/97

(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 [Signature] WWC Number 1523  
Date 6/5/97

