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

APR 27 1998

WELL I.D. # L 14967  
START CARD # 103394

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

WATER RESOURCES DEPT.

SALEM, OREGON

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

Name Bill Winslow  
Address 1843 Crooked Finger RD NE  
City Scotts Mills State OR Zip 97375

(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 344' ft.  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE		SEAL					
Diameter	From To	Material	From To	Sacks or pounds			
10"	0' 25'	Bent. cement	0' 15'	8 sacks			
8"	20' 105'	Cement	20' 105'	3 sacks			
6"	105' 344'			11 sacks			

How was seal placed: Method  A  B  C  D  E  
 Other Bent. was poured dry  
Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Size of gravel \_\_\_\_\_

Diameter	From To	Gauge	Casing/Liner			
			Steel	Plastic	Welded	Threaded
Casing: 6"	H.S. 105' 250'	250'	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 4"	4' 344'		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

(7) PERFORATIONS/SCREENS:  
 Perforations Method Skillsaw  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
304'	344'	8/32"	40	4"		<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
25 G.P.M.	N/A	340'	1 hr.

Temperature of water 54° 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 7S N or S Range 2E E or W. WM. \_\_\_\_\_  
Section 21 NW 1/4 NE 1/4 \_\_\_\_\_  
Tax Lot 700 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) \_\_\_\_\_

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

(11) WATER BEARING ZONES:  
Depth at which water was first found 300'

From	To	Estimated Flow Rate	SWL
300'	344'	25 G.P.M.	251'

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

Material	From	To	SWL
Topsoil, brown w/ gravel	0'	4'	
Silty clay, brown	4'	15'	
Silty clay, tan + grey w/ layers of claystone, tan + grey	15'	57'	
Basalt, vesicular, grey w/ clay, grey	57'	70'	
Basalt, grey w/ claystone, light blue	70'	79'	
Claystone, tan + light brown	79'	100'	
Basalt, dark brown + grey broken, some vesicles	100'	140'	
Basalt, grey + brown broken + fractured, some vesicles	140'	189'	
Basalt, grey + brown, more broken w/ some vesicles	189'	200'	
Basalt, grey + brown broken w/ some vesicles	200'	300'	
Basalt, vesicular, grey + brown	300'	344'	W.B.

Date started 8-12-97 Completed 8-19-97

(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 Clint Johansen WWC Number \_\_\_\_\_ Date 9-8-97

(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 Shawn K. Linder WWC Number 1619 Date 9-8-97