

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

Marion  
 53626

WELL I.D. # L N/A  
 START CARD # 117821

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

(1) OWNER: Well Number 3173  
 Name Steph F. Dool  
 Address 13744 Frank Prairie Rd NE  
 City Corvallis State OR Zip 97331

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

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
12"	0	19	Dry Portland	0	19	725
8"	0	160				

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: 8"	+1	160	.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) 160

(7) PERFORATIONS/SCREENS:

Perforations Method 3/8" x 2 1/4" Torch  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
125	160		980			<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
500 +		155'	1 hr.

Temperature of water 53°F 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 55 N or S Range 2W E or W. WM.  
 Section 20 SW 1/4 SW 1/4  
 Tax Lot 01900 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) 13744 Frank Prairie Rd NE

(10) STATIC WATER LEVEL:  
 \_\_\_\_\_ 22 ft. below land surface. Date 5/31/96  
 Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:  
 Depth at which water was first found 62

From	To	Estimated Flow Rate	SWL
62	152	500 +	22

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

Material	From	To	SWL
Tolson	0	2	
Brown Silty Clay	2	27	
Gray Silty Clay	27	62	
Black Sand	62	77	
Sticky Blue Clay	77	93	
Black Sand	93	105	
Black Sand Gravel	105	118	
Black Sand & Gravel	118	152	
Blue Clay	152	160	

**RECEIVED**

NOV 12 1998

WATER RESOURCES DEPT.  
 SALEM, OREGON

Date started 5/31/96 Completed 6/7/96

(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.

Signed Mark O Bein WWC Number 753  
 Date 6/7/96

(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 Mark O Bein WWC Number 753  
 Date 6/7/96