

STATE OF OREGON
WATER SUPPLY WELL REPORT

(as required by ORS 537.785)

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

MAR 1
5036

WELL ID # 3881

(START CARD) # 22662-1226Z

(1) OWNER:

Well Number: 2-WII Man

Name: City of Keizer
Address: 930 Chemawa Rd NE
City: Keizer

State: OR Zip: 97303

(2) TYPE OF WORK:

X New Well Deepening Alteration (repair)

RECEIVED

(3) DRILL METHOD:

Rotary Air Rotary Mud Cable
Other: _____

AUG 03 2000

(4) PROPOSED USE:

Domestic Commercial Industrial
Normal Irrigation Livestock Other: **Muni.**

WATER RESOURCES DEPT
SALEM, OREGON

(5) BORE HOLE CONSTRUCTION:

Special Construction approved: Yes No
Engineering listed: Yes No Type: _____ Depth of Completed Well: 191 ft

Diameter	From	To	Material	SEAL		From	To	Amount sacks or pounds
				Material	Thickness			
12 in	0'	191'	Cement with 5% Bentonite		-2'	95'	38 Sacks Cem.	

How was seal placed? Method: _____ A _____ B _____ X C _____ D _____ E _____
Other: _____
Borehole clean from: 191 ft to 195 ft Material: Colorado Silica
Gravel placed from: _____ ft to _____ ft Size of gravel: _____

(6) CASING/LINER:

Diameter: 8 in From: +1' To: 120' Gauge: .250 Steel: _____ Plastic: _____ Welded: _____ Threaded: _____
Casing: _____ X _____

Other: _____
Total Casing Length: 120' _____

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Material	Quantity	Diameter	Thickness	Casing	Linear	Material
120'	140'	80		6 in	PS				
140'	145'	50		6 in	PS				
145'	160'	100		6 in	PS				
160'	175'	Blank		6 in	PS				
175'	185'	80		6 in	PS				

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

X Pump X Surber Air Flowing Artesian
Yield (gpm): 70 GPM Discharge: 0 Drill stem at: Bailer Time: 8 hours
400 GPM 69'

Temperature of Water: 55 deg. Depth Artesian Flow listed: _____
Was a water analysis done? Yes No
Locality (State - nearest water user available for extended use?): _____ Test site: _____
Type: Muni. Other: Cased Other: Shallow
Depth of test: 27'-85'

(9) LOCATION OF WELL by legal description:

County: Marion Latitude: _____ Longitude: _____
Township: 7S N or S: Range 3W E or W: 14
Section: 10 NE 1/4 NE 1/4
Tax lot: 6200 Lot 9 Block 2 Subdivision: Hidden A
Street Address of Well (or nearest address): 3888 5th Ave N

(10) STATIC WATER LEVEL:

26 ft below land surface. Date: 5/18/2000
Artesian pressure: _____ lb per square inch. Date: _____

(11) WATER BEARING ZONES:

From	To	Estimated Flow Rate	SWL
27'	85'	N/A	18'
98'	185'	400 GPM	33'

(12) WELL LOG:

Material	Ground elevation		SWL
	From	To	
Top Soil	0	4	
Clay; brown sand	4	19	
Cobbles; small and sand; brown	19	27	
Gravel; large loose	27	41	
Gravel; med to large cemented	41	55	
Gravel; large and cobbles	55	65	
Gravel; large and sand; brown	65	72	
Clay; brown and gravel; med	72	77	
Gravel; large	77	85	
Clay; blue sticky	85	95	
Clay; grey, sandy	95	96	
Gravel and sand; black	96	116	
Clay; sandy grey	116	119	
Gravel and sand; med	119	128	
Gravel cemented with brown	126	135	
Gravel; large to small and sand	135	141	
Gravel; large, cement; brown clay	141	162	
Sand; brown and fine to coarse	162	169	
Gravel and sand; brown	169	175	
Gravel; large and loose	175	187	
Gravel; cemented, sandy clay; brown	187	191	
Sand; brown, some gravel	191	195	

Date drilled: 3/3/2000 Completed: 5/31/2000

(unbonded) Water Well Constructor Certification:

I certify that the work 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 my best knowledge and belief.

Signed: *[Signature]* WWC Number: 1954
Date: 8-2-00

(bonded) Water Well Constructor Certification:

I accept responsibility for the construction, alteration, or abandonment work performed on the 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: *Michael Woodcock* WWC Number: _____
Date: July 31, 2000