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JUL 24 2001

STATE OF OREGON
WATER SUPPLY WELL REPORT

(as required by ORS 517.765)

WATER RESOURCES DEPT
see ORS 517.765, 517.766, 517.767

Nav
55878
New Lat

WELL I.D.# 47548
START CARD # 137263

Instructions for completing this report

(1) LAND OWNER: Will Number _____
Name Dave Campbell
Address P.O. Box 167
City Silverton State OR Zip 97381-0167

(2) TYPE OF WORK: New Well Deepening Alteration (repair, modification) 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 204'
Explosives used: Yes No Type _____ Amount _____

DIAMETER		SEAL		FEET OR POINTS	
From	To	Material	From	To	Feet or points
10	0	164 bentonite	0	4	2
8	62	164 Cement	4	164	45
6	164	204			

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: Drive Shank used: Inside Outside None
Final location of sheets: _____

Casing	Diameter	From	To	Gauge	Steel	Plastic	Wetted	Threaded
	6.75	11.5	164	250	X			

(7) PERFORATIONS/SCREENS: Perforations Method _____ Material _____
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele-pipe size	Casing	Liner

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian

Yield (gpm)	Drawdown	Drill stem at	Time
200		203	1 hr

Temperature of water 53 Depth Artesian Flow Found _____
Was a water analysis done? Yes No By whom _____
Did any strata contain water not suitable for intended use? Yes No
Is Salty Murky Odor Colored Other _____
Depth of strata _____

(9) LOCATION OF WELL, by legal description:
County Marion Latitude _____ Longitude _____
Township 6-S N or S Range 1-W E or W WM
Section 33 SW 1/4 SW 1/4
 Tax lot None Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 5024 Brush Creek Rd Silverton OR

(10) STATIC WATER LEVEL: 46 ft. below land surface Date 7-19-01
Artesian pressure _____ lb per square inch Date _____

(11) WATER BEARING ZONES: Depth at which water was first found 39

From	To	Estimated Flow Rate	SWL
39	61	10	39
61	154	100	59
179	189	200	46

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(12) WELL LOG: Ground Elevation AUG 21 2001

Material	From	To	SWL
Silty Top Soil	0	7	7
Brown Silt	7	28	
Gray Clay	28	32	
Blue Clay	32	36	
Cemented gravel	36	54	
Loose brown sand gravel	54	61	
Brown Sandstone Broken	61	65	
Decomposed basalt	65	70	
Weathered basalt	70	95	
Decomposed basalt Huddy	95	115	
Weathered basalt with white clay	115	152	
Red clay & cinders	152	154	
Gray basalt	154	166	
Soft black basalt (sh)	166	179	
Fractured gray basalt	179	189	
Weathered brown basalt	189	204	

Date started 7-12-01 Completed 7-19-01

(I am/We are) 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 _____ Date 7-21-01 WW# Number 1629

(I am/We are) Water Well Contractor 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 Floyd Supper Date 7-21-01 WW# Number 1233