

STATE OF OREGON  
**WATER SUPPLY WELL REPORT**

MARI 57991

(WELL I.D.)# L **68744** (page one of two)

(as required by ORS 537.765)

(START CARD) # **159752**

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

(1) -OWNER: Well Number **68744**  
 Name **Dept. of Forestry, Cascade Dist. Santiam Unit**  
 Address **22965 North Fork Rd. SE**  
 City **Lyons,** State **OR** Zip **97358**

(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 **161** ft.  
 Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

| HOLE     |      |     | SEAL      |      |    | Sacks or pounds |
|----------|------|-----|-----------|------|----|-----------------|
| Diameter | From | To  | Material  | From | To |                 |
| 11.25    | 0    | 19  | Bentonite | 0    | 8  | 18 sacks        |
| 10       | 19   | 26  | Cement    | 8    | 26 | 8 sks w/bent    |
| 8        | 26   | 83  |           |      |    |                 |
| 6        | 83   | 161 |           |      |    |                 |

How was seal placed: Method  A  B  C  D  E  
 Other **poured & probed**  
 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: | 6"       | +2   | 38  | .250  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Liner:  | 4.5      | 1    | 161 | 160   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Final location of shoe(s) **38'**

(7) PERFORATIONS/SCREENS:

Perforations Method **Electric Saw**  
 Screens Type **Slots** Material **SDR26**

| From | To  | Slot size | Number | Diameter | Tele/pipe size | Casing                   | Liner                               |
|------|-----|-----------|--------|----------|----------------|--------------------------|-------------------------------------|
| 81   | 101 | 1/8       | 22     | 6"       |                | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

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

Pump  Bailer  Air  Flowing Artesian

| Yield gal/min | Drawdown | Drill stem at | Time  |
|---------------|----------|---------------|-------|
| 10            | 65       | 91            | 1 hr. |

Temperature of water **54** Depth Artesian Flow Found \_\_\_\_\_  
 Was a water analysis done?  Yes By whom **Mack Drilling**  
 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 **9** S Range **2** E WM.  
 Section **6** SE 1/4 **NW** 1/4  
 Tax Lot **none** Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) **Shellburg Falls Recreation Area**

(10) STATIC WATER LEVEL:  
**26** ft. below land surface. Date **03-23-04**  
 Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:  
 Depth at which water was first found **47**

| From | To | Estimated Flow Rate | SWL |
|------|----|---------------------|-----|
| 47   | 54 | 5                   | 26  |
| 68   | 94 | 5                   | 26  |

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(12) WELL LOG:  
 Ground Elevation \_\_\_\_\_ WATER RESOURCES DEPT  
 SALEM, OREGON

| Material                                 | From | To  | SWL |
|--|------|-----|-----|
| Fill Quarry rock                         | 0    | 1   |     |
| Basalt slabs w/quarry rock fill          | 1    | 4   |     |
| Clay br silty w/basalt cobbles           | 4    | 9   |     |
| Clay br & yellow silty                   | 9    | 14  |     |
| Clay to gray                             | 14   | 17  |     |
| Clay stone greenish blue                 | 17   | 28  |     |
| Clay stone brown reddish some green clay | 28   |     |     |
| stone basaltic                           |      | 32  |     |
| Basalt m-hard gray                       | 32   | 38  |     |
| Basalt grey hard few frxs                | 38   | 42  |     |
| Basalt blk hard frx                      | 42   | 91  | 26  |
| Basalt blk soft                          | 91   | 94  | 26  |
| Clay stone grey silty soft               | 94   | 111 |     |
| Clay stone light green soft              | 111  | 116 |     |
| Clay stone green sandy m-hard            | 116  | 129 |     |
| Clay stone grey med- hard                | 129  | 134 |     |
| Clay stone multi colored grey br & green | 134  | 145 |     |
| Silt stone green m-hard                  | 145  | 151 |     |
| Silt stone br & green                    | 151  | 158 |     |

\*\*\*\*\*continued on page two\*\*\*\*

Date started **03-18-04** Completed **03-23-04**

(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 *Eugene Mack* WWC Number **1394**  
 Date **03-24-04**

(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 *Eugene Mack* WWC Number **1394**  
 Date **03-24-04**

