

Mari
58801

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

WELL I.D. # L 75901
START CARD # 101600

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

(1) OWNER: Clarence Schmidt Well Number _____
Name Clarence Schmidt
Address 7881 Howell Prairie Rd. NE
City Silverton State OR Zip 97381

(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 205 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
16"	0	1'	Bentonite	0	1	bentonite
16"	1	83	Cement&5% bentonite	1	83	48sacks & 5%bentonite
12"	83	205				

How was seal placed: Method A B C D E
 Other

Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from 160 ft. to 205 ft. Size of gravel 6-9

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 12"	+2'	10209	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Grave Feed pipe inside 12" casing	1 1/2"	+2'8"	161	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 209'

(7) PERFORATIONS/SCREENS:

Perforations Method Mills Knife
 Screens Type V wire Material stainless

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
98	165	3/8x2 1/2	918	12"		<input checked="" type="checkbox"/>	<input type="checkbox"/>
160'8"	185'3"			8" pipe		<input checked="" type="checkbox"/>	<input type="checkbox"/>
182'	201'	1/2x2 1/2	260	12"		<input checked="" type="checkbox"/>	<input type="checkbox"/>
185'3"	200'6"	.055		8" p.s.		<input type="checkbox"/>	<input type="checkbox"/>
200'6"	205'			8" pipe		<input checked="" type="checkbox"/>	<input type="checkbox"/>

205' Bottom plate & lift ball

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

<input checked="" type="checkbox"/> Pump	<input type="checkbox"/> Bailer	<input type="checkbox"/> Air	Flowing <input type="checkbox"/> Artesian
Yield gal/min	Drawdown	Drill stem at	Time
360	103'		1 hr.
360	106'		4hrs

Temperature of water 53 Depth Artesian Flow _____
Was a water analysis done? Yes By _____
Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
Depth of strata: _____

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WATER RESOURCES DEPT
SALEM, OREGON

(9) LOCATION OF WELL by legal description:
County Marion Latitude _____ Longitude _____
Township 6S N or S Range 1W E or W. WM.
Section 31 NW 1/4 NE 1/4
Tax Lot 800 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) Scism Rd. NE
Silverton, OR 97381

(10) STATIC WATER LEVEL:
36'6" ft. below land surface. Date 1/26/05
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 89'

From	To	Estimated Flow Rate	SWL
84'	124'	100 gpm	36'6"
128	165'	150 gpm	36'6"
189'	197'	100 gpm	36'6"

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Topsoil	0	1	
Clay brown	1	23	
Clay gray silty	23	52	
Clay dark gray	52	57	
Clay dk. gray silty	57	70	
Cemented gravel & sand gra	70	84	36'
Cemented gravel, sand brown	84	124	36'
Clay brown	124	128	
Cemented gravel, brown clay	128	161	36'
Cemented grave, gray clay	161	165	36'
Clay gray	165	170	
Clay blue green	170	189	
Sand fine & silt gray	189	195	36'
Silt gray	195	197	36'
Sand layers&silty gray clay	197	205	
Clay gray & green, sticky	205	209	

Date started 10/27/04 Completed 2/18/05

(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 _____ WWC Number 1704
Date 2/21/05

(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 _____ WWC Number 783
Date 2/21/05