

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

WATER RESOURCES DEPT.

(START CARD) # 7814

624 MARY...
D/O/2ba

(1) OWNER:
Name City of Silverton
Address 410 S. Water St.
City Silverton State OR Zip 97381

(2) TYPE OF WORK:
 New Well Deepen Recondition Abandon

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable
 Other

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Other

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 78 ft.
Explosives used Type _____ Amount _____

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
12"	0	30	Bentonite			44 sacks
6"	30	78				

How was seal placed: Method A B C D E
 Other DRY backfill from 24' up to LS.
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"	+1	78		<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) 78

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

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
65	75	1/4	200		P	<input checked="" type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min 20 Drawdown _____ Drill stem at 78 Time 1 hr.

Temperature of water _____ 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 7S N or S, Range 1W E or W, WM.
Section 12 NE 1/4 NW 1/4
Tax Lot _____ Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) At the Silver Lake Reservoir boat ramp

(10) STATIC WATER LEVEL:
37 ft. below land surface. Date 1-29-89
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 63

From	To	Estimated Flow Rate	SWL
50	78	20	37

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
Dirt and fill	0	6	
Boulders and clay	6	12	
Broken rock	12	41	
Clay blue	41	52	
Clay yellow	52	60	
Basalt grey weathered frac.	60	78	37

Date started 1-26-89 Completed 1-29-89

(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 well construction standards. Materials used and information reported above are true to my best knowledge and belief.
Signed Byron B. Stadel WWC Number 1358 Date 2-3-89

(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 well construction standards. This report is true to the best of my knowledge and belief.
Signed CHP WWC Number 723 Date 2-7-89