

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

RECEIVED
AUG 10 1984
WATER RESOURCES DEPT
SALEM, OREGON

(for official use only)

(1) OWNER:

Name Robert Riches
Address 13166 Riches Rd. NE
City Silverton, Or. 97381 State _____

(2) TYPE OF WORK (check):

New Well ☒ Deepening ☐ Reconditioning ☐ Abandon ☐
If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

Rotary Air ☒ Driven ☐ Domestic ☐ Industrial ☐ Municipal ☐
Rotary Mud ☐ Dug ☐ Irrigation ☒ Thermal: ☐ Withdrawal ☐ Reinjection ☐
Cable ☐ Bored ☐ Other: ☐ Piezometric ☐ Grounding ☐ Test ☐

(4) PROPOSED USE (check):

(5) CASING INSTALLED: Steel ☒ Plastic ☐
Threaded ☐ Welded ☒
10" Diam. from +2 1/2 ft. to 270 ft. Gauge 250
" Diam. from _____ ft. to _____ ft. Gauge _____

LINER INSTALLED:
none

Steel ☐ Plastic ☐
Threaded ☐ Welded ☐
" Diam. from _____ ft. to _____ ft. Gauge _____

(6) PERFORATIONS:

Size of perforations _____ in. by _____ Perforated? ☐ Yes ☒ No
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.

(7) SCREENS:

Well screen installed? ☐ Yes ☒ No
Manufacturer's Name _____ Model No. _____
Type _____ Slot Size _____ Set from _____ ft. to _____ ft.
Diam. _____ Slot Size _____ Set from _____ ft. to _____ ft.

(8) WELL TESTS:

Drawdown is amount water level is lowered below static level
Was a pump test made? ☐ Yes ☐ No If yes, by whom?
Field: _____ gal./min. with _____ ft. drawdown after _____ hrs.
Air test 125 gal./min. with drill stem at 480 ft. 5 hrs.
Bailer test _____ gal./min. with _____ ft. drawdown after _____ hrs.
Artesian flow _____ g.p.m.
Temperature of water _____ Depth artesian flow encountered _____ ft.

(9) CONSTRUCTION:

Special standards: Yes ☐ No ☒
Well seal—Material used Cement Grout
Well sealed from land surface to 73 ft.
Diameter of well bore to bottom of seal 15 in.
Diameter of well bore below seal 12 in.
Amount of sealing material 60 sacks ☐ pounds ☐
How was cement grout placed? Press pumped

Was pump installed? no Type _____ HP _____ Depth _____ ft.
Was a drive shoe used? ☒ Yes ☐ No Plugs _____ Size: location _____ ft.
Did any strata contain unusable water? ☐ Yes ☒ No
Type of Water? _____ depth of strata _____
Method of sealing strata off _____
Was well gravel packed? ☐ Yes ☒ No Size of gravel: _____
Gravel placed from _____ ft. to _____ ft.

(10) LOCATION OF WELL by legal description:

County Marion SW 1/4 SE 1/4 of Section 22 of
Township 7S Range 1W WM.
(Township is North or South) (Range is East or West)
Tax Lot _____ Lot _____ Block _____ Subdivision _____
MAILING ADDRESS OF WELL (or nearest address) same as mailing
Goodknecht rd.

(11) WATER LEVEL of COMPLETED WELL:

Depth at which water was first found 48 ft.
Static level 227 ft. below land surface. Date _____
Artesian pressure _____ lbs. per square inch. Date _____

(12) WELL LOG:

Diameter of well below casing 8
Depth drilled 750 ft. Depth of completed well 750 ft.
Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level and indicate principal water-bearing strata.

MATERIAL	From	To	SWL
Soil med brown	0	3	
Clay red sticky	3	13	
Cap rock decomp. brn	13	65	
Basalt fract grey	65	68	
Basalt hard grey	68	101	
Basalt wthrd grey-brn	101	112	
Claystn med blue	112	117	
Basalt med grey	117	150	
Basalt hard grey	150	186	
Basalt wthrd brn-grn-brl	186	201	
Claystn soft brn	201	205	
Basalt wthrd brn-grey	205	217	
Basalt hard grey	217	240	
Basalt fract brn	240	276	
Basalt med grey-brn	276	339	
Basalt visic grn-gry-brn	339	348	
Basalt med grey-brn	348	394	
Basalt hard grey with	394	485	
brown inseams	394	485	H2O
Basalt hard grey	485	505	

(continued)

Date work started 7-16-84 /completed 8-4-84
Date well drilling machine moved off of well 8-4-84 19

(unbonded) Water Well Constructor Certification (if applicable):

This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.

[Signed] _____ Date 8-6-84, 19

(bonded) Water Well Constructor Certification:

Bond _____ Issued by: Union Indemnity
(number) (Surety Company Name)
On behalf of West Coast Drilling
(type or print name of Water Well Constructor)

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief:

(Signed) Chuck Stadel # 723
(Water Well Constructor)

(Dated) 8-6-84

NOTICE TO WATER WELL CONSTRUCTOR
The original and first copy of this report
are to be filed with the

WATER RESOURCES DEPARTMENT,
SALEM, OREGON 97310
within 30 days from the date of well completion.

SP*46866-690

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maria Co.
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