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OCT 5 1961

STATE ENGINEER SALEM OREGON

MAR 6695
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WATER WELL REPORT
STATE OF OREGON
G212P

State Well No. 7/2W-6N
State Permit No.

File Original and First Copy with the STATE ENGINEER, SALEM, OREGON

(1) OWNER: Name Edwin Maerz Address 1230 Franklin, N. W. Salem, Oregon

(2) LOCATION OF WELL: County Marion Owner's number, if any-- #2 1/4 Section T. 7.S R. 2.W W.M. Bearing and distance from section or subdivision corner

(3) TYPE OF WORK (check): New Well [x] Deepening [] Reconditioning [] Abandon []

(4) PROPOSED USE (check): Domestic [x] Industrial [] Municipal [] Irrigation [] Test Well [] Other [] Hayesville Water District (5) TYPE OF WELL: Rotary [] Driven [] Cable [x] Jetted [] Dug [] Bored []

(6) CASING INSTALLED: Threaded [] Welded [x] 10" Diam. from 1 ft. to 173 ft. Gage .250

(7) PERFORATIONS: Perforated? [x] Yes [] No Type of perforator used Mills Knife SIZE of perforations 1 1/2 in. by 5/16 in. 466 perforations from 68 ft. to 112 ft. 256 perforations from 137 ft. to 161 ft.

(8) SCREENS: Well screen installed [] Yes [x] No Manufacturer's Name Model No. Slot size Set from ft. to Diam. Slot size Set from ft. to

(9) CONSTRUCTION: Was well gravel packed? [] Yes [x] No Size of gravel: Gravel placed from ft. to ft. Was a surface seal provided? [x] Yes [] No To what depth? 50 ft. Material used in seal- Clay and fine sand from well Did any strata contain unusable water? [] Yes [] No Type of water? Depth of strata Method of sealing strata off

(10) WATER LEVELS: Static level 39 ft. below land surface Date 6/5/61 Artesian pressure lbs. per square inch Date Log Accepted by: [Signed] Date 19

(11) WELL TESTS: Drawdown is amount water level is lowered below static level Was a pump test made? [x] Yes [] No If yes, by whom? Driller Yield: 525 gal./min. with 21 ft. drawdown after 6 hrs. Bailer test gal./min. with ft. drawdown after hrs. Artesian flow g.p.m. Date Temperature of water Was a chemical analysis made? [] Yes [x] No

(12) WELL LOG: Diameter of well 10 inches. Depth drilled 163 ft. Depth of completed well 163 ft. Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.

MATERIAL	FROM	TO
Brown sandy clay	0	40
Coarse brown sand; some clay or silt	40	50
Small loose gravels and much brown sand	50	60
Unconsolidated coarse gravel; brown sand and some silt	60	98
Coarse gravel and sand partly cemented with tan clay	98	116
Blue clay becoming sandy at bottom of strata	116	132
Very loose, coarse black gravels and sand	132	139
Partly cemented black sand and gravel with blue clay, gradually changing to tan clay and brown sand with gravel near bottom	139	163
Work started	5/22	19 61 Completed 6/6 19 61

(13) PUMP: Manufacturer's Name Type: H.P.

Well Driller's Statement: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. NAME West Well Drilling (Person, firm, or corporation) (Type or print) Address 4098 Market Street, N. E. Driller's well number 61-9 [Signed] Marion E. West (Well Driller) License No. 30 Date 6/7, 19 61

MARI 6695

For Official Use Only:

Received Date:

County Well Log ID #

Well Identification Tag #

Mari 6695

50388

50388

WELL IDENTIFICATION APPLICATION FORM

BUYER/CURRENT WELL OWNER:

Name: Jim West, Water Superintendent, City of Salem Public Works

Mailing Address: 1410 20th Street SE, Building No. 2

City: Salem State: OR Zip: 97302 Phone: (503) 588-6063

NOTE: Well Identification Tag will be sent to the above address unless otherwise specified.

WELL LOCATION:

Latitude _____ Longitude _____

County: MARI Owner's Well Number (1st or 2nd, etc) Hayesville Well #2

Township: 7 N or S Range: 2 E or W Section 06 1/4 SW 1/4 SW

Tax Lot Number: 8100 Type of Well: water supply MUNC monitoring _____

Address of Well (if different from above): 4500 37th Ave NE, Salem, OR

Does this well have a formal water right associated with it? Yes: X No: _____

If Yes: Application #: G-6222 Permit #: 6-1956 Certificate #: 45195

WELL INFORMATION: (do not complete remainder of application if well log is attached)

Start Card Number: _____ Approx. Construction Date: MARI-6695

Well Constructor: _____

Name of Land Owner at Time of Construction: _____

Well Depth (in feet): _____ Static Water Level (in feet): _____

Diameter of Exposed Well Casing (in inches): _____

Please Return Completed Form to: Well Identification Program Oregon Water Resources Department 158 12th Street NE Salem, OR 97301-4172

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MAY 21 2001

WATER RESOURCES DEPT. SALEM, OREGON