

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

SEP 12 2017

WELL I.D. # L 92769

START CARD # 116404

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

SALEM, OR

MARI 67005

(1) LAND OWNER Well Number _____
Name ALLIUS CAM
Address 12417 INGALLS LN
City WOODBURN State OR Zip 97071

(2) TYPE OF WORK ☒ New Well
☐ Deepening ☐ Alteration (repair/recondition) ☐ Abandonment ☐ Conversion

(3) DRILL METHOD
☐ Rotary Air ☐ Rotary Mud ☒ Cable ☐ Auger ☐ Cable Mud
☐ Other _____

(4) PROPOSED USE
☒ Domestic ☐ Community ☐ Industrial ☐ Irrigation
☐ Thermal ☐ Injection ☐ Livestock ☐ Other _____

(5) BORE HOLE CONSTRUCTION Special Construction: ☐ Yes ☐ No
Depth of Completed Well 143 ft.
Explosives used: ☐ Yes ☐ No Type _____ Amount _____

BORE HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or Pounds
10	1	38	BENTONITE	1-38	21	
6	38	143				
						CALCULATED 15

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E
☒ Other 690-210-0340

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	0	123		☒	☐	☒	☐
Liner:	5 1/4	112	143		☒	☐	☒	☐

Drive Shoe used ☐ Inside ☒ Outside ☐ None
Final location of shoe(s) 123 & 143

(7) PERFORATIONS/SCREENS
☒ Perforations Method TORCH
☐ Screens Type _____ Material _____

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
118	124	1/8x4	20			☐	☒

(8) WELL TESTS: Minimum testing time is 1 hour
☒ Pump ☐ Bailer ☐ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
28	16		2 HR

Temperature of water 53 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 (legal description)
County MARION
Tax Lot 500 Lot _____
Township 53 N or S Range 1W E or W WM
Section 4 SE 1/4 NW 1/4
Lat _____ " or _____ (degrees or decimal)
Long _____ " or _____ (degrees or decimal)

Street Address of Well (or nearest address) 12387 INGALLS LN, WOODBURN

(10) STATIC WATER LEVEL
52 ft. below land surface. Date 23 AUG 17
_____ ft. below land surface. Date _____
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
89	143		52

(12) WELL LOG Ground Elevation _____

Material	From	To	SWL
SOIL	1	3	
CLAY BROWN	3	47	
CLAY GRAY	47	89	
CLAY SILTY	89	105	
SILT SAND	105	116	
CEMENTED GRAVEL	116	123	
CLAY GREEN	123	124	
SILT DK GRAY	124	127	
SAND GRAY	127	139	
SAND w/ GRAVEL	139	143	

TDS-231

Date Started 17 AUG 17 Completed 23 AUG 2017

(unbonded) Water Well Constructor Certification
I certify that the work I performed on the construction, deepening, 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.

RECEIVED BY OWRD

WWC Number _____ Date _____

Signed _____ SEP 12 2017

(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.

WWC Number 743 Date 9-11-17

Signed Richard Beck