

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

MARI
 074

83/2w/10c

(START CARD) # 17043

(1) OWNER: Well Number: _____
 Name Hertage Seedlings, Inc.
 Address 4192 1/2 75th Ave SE
 City Salem State Or Zip 97301

(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 Yes No Depth of Completed Well 210 ft.
 Explosives used Type _____ Amount _____

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
10	0	20	Cement	0	79	19.5 lbs.
8	20	80				
6	80	210				

How was seal placed: Method A B C D E
 Other _____
 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	41	29		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 4 1/2"	0	210	4 1/2"	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

Perforations Method Steel Saw
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
110	210	1/4 x 1/4	120			<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
100		208	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 44 Longitude _____
 Township 8S N or S, Range 2W E or W, WM.
 Section 10 NW 1/4 SW 1/4
 Tax Lot _____ Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) 7194 - 71st Ave SE
Salem, Or 97301

(10) STATIC WATER LEVEL:
30 ft. below land surface. Date May 14, 1990
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found 165

From	To	Estimated Flow Rate	SWL
165	210	100	30

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
Soil	0	2	
Claystone Yellow	2	13	
Clay & Gravel	13	15	
Clay	15	72	
Rock	72	131	
Rock Black Hard	131	163	
Rock Black Brown Broken	163	180	
Rock Black Brown Very Broken	180	210	30

Date started May 9, 1990 Completed May 14, 1990

(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.
 WWC Number _____
 Signed _____ Date _____

(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. A 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.
 WWC Number 75
 Signed William Perry Date May 14, 1990