

**Mari**  
**079**

**WATER WELL DRILLERS REPORT**  
**STATE OF OREGON**

Do Not State Well No. \_\_\_\_\_  
Fill In State Permit No. \_\_\_\_\_

**(1) OWNER:**

Name **JIM STETTLER**  
Address **RT. 2 BOX 444**  
**SALEM ORE**

**(2) LOCATION OF WELL:**

County **MARION** Owner's number, if any—  
R. F. D. or Street No.  
Bearing and distance from section or subdivision corner

**(3) TYPE OF WORK (check):**

New well  Deepening  Reconditioning  Abandon   
If abandonment, describe material and procedure in Item 11.

**(4) PROPOSED USE (check):**

Domestic  Industrial  Municipal   
Irrigation  Test Well  Other

**(5) EQUIPMENT:**

Rotary   
Cable   
Dug Well

**(6) CASING INSTALLED:**

FROM	ft. to	ft.	Diam.	Gage or Wall	Diameter of Bore	from	to	ft.
1	118	8	4	4	NONE			

Type and size of shoe or well ring **8" STEEL** Size of gravel:  
Describe joint **WELDED**

**(7) PERFORATIONS:**

Type of perforator used **HILLS TYPE**  
SIZE of perforations **3** in. length by **3** in.  
FROM **1** to **80** feet per foot No. of rows

**SCREENS:**

Give Manufacturer's Name, Model No. and Size **NONE**

**(8) CONSTRUCTION:**

Was a surface sanitary seal provided?  Yes  No To what depth **1 ft.**  
Were any strata sealed against pollution?  Yes  No  
If yes, note depth of strata  
FROM **1** to **80** ft.

METHOD OF SEALING **BACK FILLING**

**(9) WATER LEVELS:**

Depth at which water was first found **75** ft.  
Standing level before perforating **33** ft.  
Standing level after perforating **29** ft.

Log Accepted by:  
[Signed] **James C. Stettler** Dated **July 11**, 19**56**  
Owner

**(10) WELL TESTS:**

**STETTLER SUPPLY**

Was a pump test made?  Yes  No If yes, by whom?  
Yield: **200** gal./min. with **37** ft. draw down after **2** hrs.  
" **375** " **52** " **2** "  
" **450** " **59** " **2** "  
Artesian flow \_\_\_\_\_ g.p.m.  
Shut-in pressure \_\_\_\_\_ lbs. per square inch.  
Bailer test \_\_\_\_\_ g.p.m. with \_\_\_\_\_ ft. drawdown  
Temperature of water **58** Was a chemical analysis made?  Yes  No  
Was electric log made of well?  Yes  No

**(11) WELL LOG:**

Diameter of well **8" I-D** inches.  
Total depth **118** ft. Depth of completed well **118** 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.  
ft. to ft.  
**41" 41" TOPSOIL**  
**50" 54" SANDY CLAY**  
**61" 601" MUCKY SAND YELLOW**  
**21" 621" GRAVEL + FINE SAND**  
**131" 751" MUCKY SAND**  
**31" 781" CEMENT GRAVEL W.B.**  
**61" 84" YELLOW CLAY**  
**61" 90" BLUE CLAY**  
**161" 106" CEMENT GRAVEL**  
**61" 1066" WATER GRAVEL**  
**116" 118" CEMENT GRAVEL W.B.**

Ground elevation at well site \_\_\_\_\_ feet above mean sea level.

Work started **5-4-56** Completed **5-7-56**

**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 **J.A. SNEED & SONS**  
(Person, firm, or corporation) (Typed or printed)

Address **2505 BROOKS ST SALEM**

Driller's well number \_\_\_\_\_

[Signed] **J.A. Sneed**  
(Well Driller)

License No. **6** Dated **5-18**, 19**56**

2-67423

For Official Use Only by The Oregon Water Resources Department:

RECEIVED

Received Date:

SEP 16 2003

County Well Log ID #

Mari 79

Well Identification Tag #

2-67423

WATER RESOURCES DEPARTMENT  
SALEM, OREGON

WELL IDENTIFICATION APPLICATION FORM

(please follow attached instructions)

\*\*\*\*\*PLEASE SEE INSTRUCTIONS IF THIS IS A SHARED WELL\*\*\*\*\*

BUYER/CURRENT LANDOWNER (FOR PROPERTY WELLS LOCATED ON):

Name: Ray Craig Trust

Mailing Address: 4460 Kale St. N.E.

City: Salem State: OR Zip: 97305 Phone: ( ) NONE

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

WELL LOCATION:

County: Marion Well # 2 (designation owner has given to well if multiple wells exist on same property)

Township: 7 North or South (circle one) Range: 2 East or West (circle one) Section: 6 1/4 1/4

Tax Lot #: ~~R22088~~ (not the "tax acct.#") Type of Well: water supply?  monitoring?

Address of Well: 4460 Kale St. N.E. Salem OR 97305  
(Number) (Street) (City)

Does this well have a formal water right associated with it? Yes: No: (If unknown you may want to contact the Water Rights Information Group at 503-378-3739 extension 201 for research)

If Yes: Application #: Permit #: Certificate #:

(Optional): Latitude Longitude (May sometimes be obtained from Well Log Report)

WELL INFORMATION: (If available, attach copy of driller's well report. If report is not available please complete the following, at a minimum the prior landowner names going back until around the time the well would have been drilled. Prior landowners can be obtained from the County Assessor.)

Start Card #: Approx. Well Construction Date: Home built in 1953

Well Constructor: Sneed

Name of Land Owner at Time of Construction (or list of prior landowners)

Jim Stettler

Well Depth (in feet): 118'-218' Static Water Level (in feet):

Diameter of Exposed Well Casing (in inches):

Please Return Completed Form to: Well ID Program @ Oregon Water Resources Department  
158 12th Street NE - Salem, OR 97301-4172, or fax to 503-378-8130