

RECEIVED

MARR 9244 (START CARD) #

75/aw/28 dd 17639

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

SEP 05 1990

(1) OWNER: Name Myron Kuenzi Address 6500 State St. City Salem

(9) LOCATION OF WELL by legal description: Marion County, Township 7-5, Range 2 W, Section 28 SE 1/4 SE 1/4, Street Address of Well 6475 State St. NE Salem OR.

(2) TYPE OF WORK: [X] New Well [ ] Deepen [ ] Recondition [ ] Abandon

(3) DRILL METHOD: [X] Rotary Air [ ] Rotary Mud [X] Cable [ ] Other

(4) PROPOSED USE: [ ] Domestic [ ] Community [ ] Industrial [X] Irrigation [ ] Thermal [ ] Injection [ ] Other

(5) BORE HOLE CONSTRUCTION: Special Construction approval Yes No Depth of Completed Well 525 ft. Explosives used [ ] [X] Type Amount

Table with columns: HOLE Diameter, SEAL Material, Amount sacks or pounds. Includes entries for Cement and bentonite.

How was seal placed: Method [ ] A [ ] B [X] C [ ] D [ ] E Backfill placed from ft. to ft. Material Gravel placed from ft. to ft. Size of gravel

(6) CASING/LINER: Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Includes entries for Casing and Liner.

(7) PERFORATIONS/SCREENS: [ ] Perforations Method None [ ] Screens Type Material

Table with columns: From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner.

(8) WELL TESTS: Minimum testing time is 1 hour. [ ] Pump [ ] Bailer [X] Air [ ] Flowing Artesian. Yield gal/min 40gpm, Drawdown, Drill stem at 515, Time 1 hr.

Air tests may fluctuate. 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:

(10) STATIC WATER LEVEL: 48 ft. below land surface. Date 8-16-90. Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES: Table with columns: From, To, Estimated Flow Rate, SWL. Includes entry for 219 to 525 ft depth with 40 approx flow rate.

(12) WELL LOG: Table with columns: Material, From, To, SWL. Lists various soil and rock layers from 0 to 178 ft depth.

Date started 6-30-90 Completed 8-16-90

(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. All 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 1273, Signed Floyd G. Seppel, Date 8-25-90

SEP 05 1990

(START CARD) # 17639

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

(1) OWNER: Well Number: \_\_\_\_\_  
Name Myron Kuenzi  
Address 6500 State St.  
City Salem State OR Zip \_\_\_\_\_

(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  Depth of Completed Well \_\_\_\_\_ ft.  
Explosives used Yes  No  Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE SEAL  
Diameter From To Material From To Amount sacks or pounds

Diameter	From	To	Material	From	To	Amount

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:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) \_\_\_\_\_

(7) PERFORATIONS/SCREENS:  
 Perforations Method \_\_\_\_\_  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour  
 Pump  Bailer  Air  Flowing Artesian  
Yield gal/min \_\_\_\_\_ Drawdown \_\_\_\_\_ Drill stem at \_\_\_\_\_ Time \_\_\_\_\_

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 \_\_\_\_\_ Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township \_\_\_\_\_ N or S, Range \_\_\_\_\_ E or W, WM. \_\_\_\_\_  
Section \_\_\_\_\_ 1/4 \_\_\_\_\_ 1/4 \_\_\_\_\_  
Tax Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) \_\_\_\_\_

(10) STATIC WATER LEVEL:  
\_\_\_\_\_ ft. below land surface. Date \_\_\_\_\_  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found \_\_\_\_\_

From	To	Estimated Flow Rate	SWL

(12) WELL LOG: Ground elevation \_\_\_\_\_

Material	From	To	SWL
<u>Green sticky clay</u>	<u>178</u>	<u>198</u>	
<u>Clay stone firm</u>	<u>198</u>	<u>232</u>	
<u>Gray sandy clay stone</u>			
<u>Multi colored seams</u>	<u>232</u>	<u>315</u>	
<u>Clay stone - sandy</u>	<u>315</u>	<u>396</u>	
<u>Gray sandstone - Hard</u>			
<u>+ Soft layers with interbedded layers of</u>			
<u>Lime stone</u>	<u>396</u>	<u>510</u>	
<u>Gray Sandstone</u>	<u>510</u>	<u>525</u>	

Date started \_\_\_\_\_ Completed \_\_\_\_\_

(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.  
Signed \_\_\_\_\_ WWC Number \_\_\_\_\_  
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. All 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.  
Signed \_\_\_\_\_ WWC Number \_\_\_\_\_  
Date \_\_\_\_\_