

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

RECEIVED
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M 9305
 65/1E-312b
 Dept Record

(1) OWNER:

Name Kevin Loe
 Address 5648 Evans Loop Rd. NE
 City Silverton State OR Zip 97381

(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 _____

BORE HOLE CONSTRUCTION:

Special Construction approval Yes No Depth of Completed Well 880 ft.
 Yes No
 Explosives used Type _____ Amount _____

| HOLE | | | SEAL | | | Amount sacks or pounds |
|----------|------|-----|----------|------|----|---------------------------|
| Diameter | From | To | Material | From | To | |
| 16 | 0 | 54 | cement | 0 | 54 | 102 sacks |
| 12 | 54 | 210 | - | - | - | - |
| 10 | 210 | 880 | - | - | - | - |

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:

| Casing/Liner | Diameter | From | To | Gauge | Material | | | |
|--------------|----------|------|-----|-------|--------------------------|--------------------------|--------------------------|--------------------------|
| | | | | | Steel | Plastic | Welded | Threaded |
| Casing: | 12 | +1 | 54' | 25 | <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: | NA | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Location of shoe(s) 54

(7) PERFORATIONS/SCREENS:

Perforations Method NA
 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 |
|---------------|----------|---------------|-------|
| 300 | | 548 | 1 hr. |
| 600 | | 875 | |

Temperature of water NA 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 high conductivity

Depth of strata: 850-880

(9) LOCATION OF WELL by legal description:

County Marion Latitude _____ Longitude _____
 Township T6S N or S, Range 1E E or W, WM.
 Section 31 NW 1/4 SE 1/4
 Tax Lot _____ Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) 5798

(10) STATIC WATER LEVEL:

190 ft. below land surface. Date 11-4-87
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found _____

| From | To | Estimated Flow Rate | SWL |
|----------|-------|---------------------|-----|
| existing | water | 180 gpm | |
| 475 | 548 | 120 gpm | 210 |
| 850 | 880 | 300 gpm | 190 |

(12) WELL LOG:

Ground elevation _____

| Material | From | To | SWL |
|------------------------------|------|-----|--------|
| Breccia Blue | 302 | 475 | |
| Breccia Fractured | 475 | 535 | 80gpm |
| Breccia Brown | 535 | 548 | 40gpm |
| Breccia Blue | 548 | 660 | |
| Sandstone-coarse, grey, soft | 660 | 710 | |
| Sandstone-blue, hard | 710 | 760 | |
| Breccia | 760 | 850 | |
| Breccia Fractured | 850 | 880 | 300gpm |
| High conductivity | 850 | 880 | 190 |
| t3 mh possible sodium | | | |

Step test (air)
 400' = 340 gpm
 355' = 300 gpm
 330' = 260 gpm
 305' = 225 gpm
 280' = 160 gpm
 255' = 100 gpm
 205' = 60 gpm

Date started 10-22-87 Completed 11-4-87

(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 Jon MCL WWC Number _____ Date 11-4-87

(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 Chris WWC Number 723 Date _____